

KERN COUNTY PROBATION DEPARTMENT  
**MONTHLY REPORT OF PROBATIONER**

P.O. Box 3309  
2005 Ridge Road  
Bakersfield, CA 93385-3309  
(661) 868-4196

Date: \_\_\_\_\_

**ATTENTION: 18 CASELOAD**

[ ] CHECK BOX IF NEW ADDRESS

Name: \_\_\_\_\_

Your Probation File #: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Are you attending school, training or a vocational program: Yes \_\_\_\_ No \_\_\_\_

Name of School/Program: \_\_\_\_\_

Are you employed: Yes \_\_\_\_ No \_\_\_\_

Name of Employer: \_\_\_\_\_

Earnings last month: \$ \_\_\_\_\_

Is there any reason why you are unable to work? Yes \_\_\_\_ No \_\_\_\_ If unable to work, why? \_\_\_\_\_

If you are **not** employed, how many jobs \* did you apply for this month? \_\_\_\_\_

\*List the names of the companies on the back of this form. Include an address or telephone number to verify your applications, if it becomes necessary.

Did you make any payments toward Court-ordered financial obligations? Yes \_\_\_\_ No \_\_\_\_

**Send payments to:** Kern County Probation Department, Attention: Accounts Receivable, P.O. Box 3219, Bakersfield, CA 93385, or **bring payment to** the Juvenile Justice Center, 2100 College Avenue, Bakersfield, CA.

If you fail to pay your restitution, restitution fine, restitution fund, and/or fines as ordered by the Court, or you violate your probation in some other manner, you will be brought before the Juvenile Court. If the Court orders you into custody, it will be recommended that any time in custody be served in the **Kern County Jail at the Lerdo Facility**.

**Pursuant to Welfare and Institutions Code Section 730.7, the minor and the minor's parent(s)/guardian are advised they are jointly and severally liable for the amount of any restitution, fines, and Penalty Assessments ordered by the Court. If you fail to pay your restitution, restitution fine, restitution fund, and/or fines as ordered by the Court, or you violate your probation in some other manner, you will be brought before the Juvenile Court.**

Amount of Payment: \$ \_\_\_\_\_ Date Payment Made: \_\_\_\_\_

If no payment made, why? \_\_\_\_\_

Did you have any contact with law enforcement? Yes \_\_\_\_ No \_\_\_\_ If yes, please explain: \_\_\_\_\_

**Monthly Report Forms must be Received at the Probation Department by the 15th of each month. DO NOT CALL:** Phone calls **will not** be accepted in place of reports. The bottom part of this form may be used by probationer or parent/guardian for comments:

Please send more forms: Yes \_\_\_\_ No \_\_\_\_

Probationer's Signature: \_\_\_\_\_