OBS
Probation and Parole Services Information Transmittal Form
Offender Restitution and Fee Obligations

ODOC # _____ NAME: _____

Sentencing County: _____ Case #: _____-_____ [should be the Controlling Case # (longest sentence)]

Interstate Case: Sending State _____ Date Received: _____

Date Sentenced: _____ Deferred? ☐ Suspended? _____ Years _____ Months

Supervised How long? _____ Years _____ Months ☐ Until Obligations are Paid in Full Paroled / Released Date: _____

Please complete the information below for <u>ALL</u> fees due per the offender's J&S

<u>FEES DUE</u>:

Probation/Parole Fee: $ _____ per month Beginning: _____ ☐ Fee Waived when sentenced

GPS Fee: $ _____ per month Beginning: _____ ☐ Fee Waived when sentenced

EMP Fee: $ _____ per month Beginning: _____ ☐ Fee Waived when sentenced

Community Sentencing Admin Fee: $ _____ per month Beginning: _____ ☐ Fee Waived when sentenced

Pre-Sentence Investigation Fee: $250 or other amount $ _____

DNA Fee: Yes _____ No _____

<u>RESTITUTION ORDERED</u>: Please attach a copy of the completed restitution schedule **<u>OR</u>** check the appropriate box

☐ No restitution ordered

☐ Restitution paid through DA

THIS FORM NEEDS TO BE COMPLETED AND DELIVERED TO THE RESTITUTION ACCOUNTING OFFICE PRIOR TO YOUR CLIENT'S FIRST VISIT