## IN THE DISTRICT COURT FOR THE STATE OF ALASKA FIRST JUDICIAL DISTRICT AT PETERSBURG

STATE OF ALASKA,	)		
	) Plaintiff, )		
V.	)		
	, )		
	) Defendant, ) )	CASE NO.	CR

TO: Community Work Service Supervisor

Please complete this form and return it to the court upon completion of community work service by defendant.

## STATEMENT REGARDING COMMUNITY WORK SERVICE

I certify that the above-named defendant has completed:

- hours of community work service.
- no community work service.

Date

Signature

Print Name

Agency

RETURN THIS FORM TO:

Petersburg Trial Courts PO Box 1009 Petersburg, AK 99833

I certify that on \_\_\_\_\_\_ a copy of this statement of work completed was given to the defendant.

Clerk: