## **CITY OF BROOKSHIRE MUNICIPAL COURT**

4029 Fifth St. / P.O. Box 160 Brookshire, TX. 77423 Phone: (281)375-5048 / Fax: (281)934-4960

## **COMMUNITY SERVICE TIME SHEET**

NAME: _						DOB:			
CITATION #:			HOURS REQUIRED:			COMPLETED BY:			
DATE	TIME IN	TIME OUT	TIME IN	TIME OUT	EMPLOYERS SIGNATURE	HOURS WORKED	TOTAL HOURS	INITIALS	
			J <b>NITY SE</b>	CRVICE F	FORMED WITH A G HOURS MAY NOT B OF DEFENDANT'S FA	E COMPLETED			
NAME C	OF ORGA	NIZATIO	N / NON-	PROFIT/	EVENT:				
LOCATI	ION:		PHONE:						
TYPE O	F WORK:	;							
WORK PERFORMED			SATISFACTORILY:						
			UNS	UNSATISFACTORILY:					