

## United States District Court Worksheet for Pretrial Services Report

<b>PACTS Client ID No.:</b>	<b>Docket/Defendant No.:</b>	<b>Arrest Date:</b>	<b>Interviewing Officer:</b>	<b>Interview Date:</b>
<b>CLIENT PERSONAL DATA - General</b>				
<b>Prefix:</b>	<b>Title:</b> (Dr., PhD., etc.)	<b>Court Name:</b> First                      Middle                      Last                      Generation		
<b>SSN/EIN:</b>		<b>State Identification No.:</b>	<b>FBI No.:</b>	
<b>Register/Marshal's No.:</b>		<b>ICE (INS) No.:</b>	<b>Driver's License No.:</b> (Include state)	
<b>CLIENT PERSONAL DATA - Alternate Names and Ids</b> (If more than three, attach list)				
<b>First</b>	<b>Middle</b>	<b>Last</b>	<b>Generation</b>	<input type="checkbox"/> Also Known As <input type="checkbox"/> Maiden Name <input type="checkbox"/> Alternate Name <input type="checkbox"/> True Name
<b>First</b>	<b>Middle</b>	<b>Last</b>	<b>Generation</b>	<input type="checkbox"/> Also Known As <input type="checkbox"/> Maiden Name <input type="checkbox"/> Alternate Name <input type="checkbox"/> True Name
<b>First</b>	<b>Middle</b>	<b>Last</b>	<b>Generation</b>	<input type="checkbox"/> Also Known As <input type="checkbox"/> Maiden Name <input type="checkbox"/> Alternate Name <input type="checkbox"/> True Name
<b>Alternate IDs:</b> (List any other alien numbers, state ID numbers, SSNs, DOBs)				
<b>Distinguishing Characteristics:</b> (Scars, tattoos, etc.)				
<b>CLIENT PERSONAL DATA - Demographics</b>				
<b>Sex:</b> (Check one)  <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Unknown	<b>Race:</b> (Check one)  <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Other Race <input type="checkbox"/> Unknown <input type="checkbox"/> White	<b>Hispanic:</b> (Check one)  <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown  <b>Eye Color:</b> <input type="checkbox"/> Blue <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Hazel <input type="checkbox"/> Other	<b>Height:</b>	<b>Weight:</b>
			<b>Age:</b>	<b>Date of Birth:</b>
			<b>Hair Color:</b> <input type="checkbox"/> Black <input type="checkbox"/> Blonde <input type="checkbox"/> Brown <input type="checkbox"/> Grey <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> Red <input type="checkbox"/> White	
<b>Place of Birth:</b>	<b>Country of Birth:</b>	<b>Citizenship:</b> (Check one) <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. National <input type="checkbox"/> Naturalized U.S. Citizen <input type="checkbox"/> Citizen of Another Country <input type="checkbox"/> Unknown		<b>Immigration Status:</b> (Check one) <input type="checkbox"/> Humanitarian Migrant (Refugee) <input type="checkbox"/> Illegal Alien <input type="checkbox"/> Permanent Resident (green card) <input type="checkbox"/> Temporary Visa (travel, student, emp.) <input type="checkbox"/> Unknown
<b>Do you possess a passport/visa?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Country of Citizenship:</b>		<b>Date Naturalized:</b> _____
<b>Location:</b>				
<b>Have you traveled outside the United States?</b>				
<b>Date Immigrated to the United States:</b> _____ <b>Date Entered the United States:</b> _____				
<b>CLIENT PERSONAL DATA - Remarks</b>				
Include in PACTS? <input type="checkbox"/> Yes <input type="checkbox"/> No				

[illegible]

### MARITAL HISTORY (Including cohabitation)

(Check box if living with defendant)

**Current Marital Status:** ☐ Cohabiting ☐ Divorced ☐ Married ☐ Separated ☐ Single ☐ Widowed ☐ Unknown  
(Current Personal Data/Profile)

Name	Marital Status	Citizenship	Address/ Telephone No.	Dates of Marriage	No. of Children
<input type="checkbox"/> Current:					

### CHILDREN

(Check box if living with defendant)

Name/Age of Children	Children Live With Whom?	Citizenship	Address/ Telephone No.	Frequency of Contact	Support?
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					
<input type="checkbox"/>					

### EDUCATION

**Education Level:** (Client Personal Data/Profile)

- ☐ No High School Diploma/GED    ☐ Some College    ☐ Doctorate  
☐ Graduate Equivalency    ☐ Associate Degree    ☐ Unknown  
☐ Vocational/Apprentice Graduate    ☐ Bachelor's Degree  
☐ High School Diploma    ☐ Master's Degree

Date Education Obtained/Last Year Attended: \_\_\_\_\_

Name/Location of Current School: \_\_\_\_\_

Grade Completed: \_\_\_\_\_

Certificates/Degrees: \_\_\_\_\_

### MILITARY HISTORY

**Branch of Service:**

**Dates of Service:**

**Type of Discharge:**

Were you court-martialed?

☐ Yes ☐ No

Was any disciplinary action taken?

**English Language Skills:** (Client Personal Data/Profile)

- ☐ Fluent in English as Primary Language    ☐ Mute - Fluent in International Sign Language  
☐ Fluent in English as Secondary Language    ☐ Mute - Limited or No Fluency in International Sign Language  
☐ Limited Fluency in English    ☐ Unknown  
☐ No Fluency in English    Primary Language (if not English): \_\_\_\_\_

[illegible]

<b>FINANCIAL INFORMATION</b>																																									
<b>EMPLOYMENT INCOME:</b>  Yearly/Monthly/Weekly \$ _____  <b>PAYMENT METHOD:</b> (Check One) <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Commission <input type="checkbox"/> Other  <b>SPOUSE/SIGNIFICANT OTHER'S OCCUPATION</b> _____  Yearly/Monthly/Weekly \$ _____ Yearly/Monthly/Weekly \$ _____		<b>Other Source of Income:</b> (Client Personal Data/Employment)  <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Alimony</td> <td style="width: 10%;">\$ _____</td> <td style="width: 50%;">Payback on Loans</td> <td style="width: 10%;">\$ _____</td> </tr> <tr> <td>Child Support</td> <td>\$ _____</td> <td>Retirement Pension</td> <td>\$ _____</td> </tr> <tr> <td>Disability Insurance/</td> <td>\$ _____</td> <td>Severance Pay</td> <td>\$ _____</td> </tr> <tr> <td>Employee Benefit</td> <td></td> <td>Trust</td> <td>\$ _____</td> </tr> <tr> <td>Dividend</td> <td>\$ _____</td> <td>Unemployment Comp.</td> <td>\$ _____</td> </tr> <tr> <td>Family Support</td> <td>\$ _____</td> <td>Unknown</td> <td>\$ _____</td> </tr> <tr> <td>Food Stamps</td> <td>\$ _____</td> <td>Other</td> <td>\$ _____</td> </tr> <tr> <td>Investments</td> <td>\$ _____</td> <td>Social Security</td> <td>\$ _____</td> </tr> <tr> <td>Lawsuit Payout</td> <td>\$ _____</td> <td>Social Security (disability)</td> <td>\$ _____</td> </tr> </table>				Alimony	\$ _____	Payback on Loans	\$ _____	Child Support	\$ _____	Retirement Pension	\$ _____	Disability Insurance/	\$ _____	Severance Pay	\$ _____	Employee Benefit		Trust	\$ _____	Dividend	\$ _____	Unemployment Comp.	\$ _____	Family Support	\$ _____	Unknown	\$ _____	Food Stamps	\$ _____	Other	\$ _____	Investments	\$ _____	Social Security	\$ _____	Lawsuit Payout	\$ _____	Social Security (disability)	\$ _____
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<b>ASSETS</b>		<b>LIABILITIES</b>		<b>BALANCE</b>	<b>MONTHLY PAYMENT</b>																																				
Cash \$ _____		Rent or Mortgage Payment																																							
Savings Account \$ _____		Other Mortgage																																							
Checking Account \$ _____		Past Due/Pending Foreclosure?																																							
Stocks/Bonds/Retirement Accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No																																							
Describe: \$ _____		Utilities																																							
		Groceries																																							
		Child Care																																							
Other Accounts \$ _____		Child Support (Ordered or Voluntary?)																																							
\$ _____		Alimony																																							
\$ _____		Personal Loans																																							
Valuable Property (collections, jewelry, etc.) \$ _____		Business Liabilities																																							
Business Assets \$ _____																																									
<b>Motor Vehicles - Ownership</b>		<b>Motor Vehicles - Loans/Leases</b>																																							
<b>Year</b>	<b>Make</b>	<b>Model</b>	<b>Amount</b>	<b>Creditor</b>																																					
Real Estate:		Auto Insurance																																							
Date Purchased:		Total Credit Card Debt																																							
Address:		School Loans																																							
Current Market Value	\$ _____	Outstanding Medical Bills																																							
Equity	\$ _____	Outstanding Taxes/Fines/Restitution																																							
Down Payment	\$ _____	Other Debts/Monthly Expenses																																							
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type of Bankruptcy Filed: _____																																							
Location of Court:		Year Filed:		Amount Discharged:																																					
<b>ADDITIONAL NOTES</b>																																									

<b>HEALTH</b>					
<b>Physical Health</b>					
<b>Brief Description:</b>					
<b>Physical Health Status:</b> (Client Personal Data/Profile) <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 48%;"> <input type="checkbox"/> Minor Medical Problems Only  <input type="checkbox"/> Significant Medical Disorder (Under control but follow-up care required)  <input type="checkbox"/> One or More Chronic or Recurrent Medical Problems  <input type="checkbox"/> Uncontrolled Significant Disorder             </div> <div style="width: 48%;"> <input type="checkbox"/> Diagnostic Evaluation or Specific Treatment in Progress  <input type="checkbox"/> None  <input type="checkbox"/> Unknown             </div> </div>					
<b>Names of Medications and Reason(s) for Use:</b>					
<b>Mental Health</b>					
<b>Current Mental Health Status:</b> (Check all that apply) (Client Personal Data/Profile) <div style="margin-top: 5px;"> <input type="checkbox"/> No evidence of a current or past mental health condition.  <input type="checkbox"/> History of a mental health condition. No active symptoms.  <input type="checkbox"/> Mental health condition requiring ongoing treatment.  <input type="checkbox"/> Has been in therapy within the last 12 months for a mental health condition.  <input type="checkbox"/> Currently taking medication for a mental health condition (psychotropic drug).  <input type="checkbox"/> Has seen a physician within the last 12 months for a mental health condition.  <input type="checkbox"/> Has been hospitalized within the last 24 months for a mental health condition.           </div>					
Have you ever seen a doctor for any emotional or psychiatric problems? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              If yes, when, where, and last visit?					
Have you ever been hospitalized for emotional problems? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              If yes, when and where?					
Have you ever thought of or attempted suicide? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              If yes, when, and what method was used or thought of?					
Have you ever been prescribed medication for emotional or psychiatric problems? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              If yes, name of medication(s) and how long you used it:					
Do you have current thoughts of suicide, hearing voices, or seeing things? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              If yes, explain.					
Do you have a history of gambling? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              If yes, describe the type of gambling activities, frequency, and amount:					
Do you have a history of domestic violence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              Explain:					
<b>Mental Health Treatment</b>					
Dates	Name of Program	Location	Purpose	Inpatient/Outpatient	Completed? If no, why?
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>SUBSTANCE ABUSE HISTORY</b> (Client Personal Data/Profile)						
Drug Use	Indicate Drugs of 1 <sup>st</sup> , 2 <sup>nd</sup> , and 3 <sup>rd</sup> Choice	Current	History of	Age Use Began	Last Used	Frequency Used
Alcohol		<input type="checkbox"/>	<input type="checkbox"/>			
Amphetamines		<input type="checkbox"/>	<input type="checkbox"/>			
Benzodiazepines		<input type="checkbox"/>	<input type="checkbox"/>			
Cannabinoids		<input type="checkbox"/>	<input type="checkbox"/>			
Club/Designer Drugs		<input type="checkbox"/>	<input type="checkbox"/>			
Cocaine		<input type="checkbox"/>	<input type="checkbox"/>			
Hallucinogens (PCP, LSD)		<input type="checkbox"/>	<input type="checkbox"/>			
Heroin		<input type="checkbox"/>	<input type="checkbox"/>			
Methamphetamines		<input type="checkbox"/>	<input type="checkbox"/>			
Prescription Opiates		<input type="checkbox"/>	<input type="checkbox"/>			
Other		<input type="checkbox"/>	<input type="checkbox"/>			
<b>Substance Abuse Treatment</b>						
<b>Substance Abuse Treatment History</b> (Check all that apply)		Current	History of	Notes		
Inpatient Treatment		<input type="checkbox"/>	<input type="checkbox"/>			
Outpatient Treatment		<input type="checkbox"/>	<input type="checkbox"/>			
Self-Help (AA/NA)		<input type="checkbox"/>	<input type="checkbox"/>			
Confined Treatment Program (BOP)		<input type="checkbox"/>	<input type="checkbox"/>			
Dates	Name of Program	Location	Purpose	Inpatient/ Outpatient	Type of Discharge (Satisfactory/Unsatisfactory)	
<p>If a drug test were taken today, would it reveal any illegal substance or medications?    <input type="checkbox"/> Yes    <input type="checkbox"/> No    <input type="checkbox"/> Unknown</p> <p>If so, what illegal drugs/medications?</p> <p>Would you like to receive treatment?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>						
<b>ADDITIONAL NOTES</b>						

<b>SELF-REPORTED CRIMINAL HISTORY</b> (including juvenile adjudications)					
Date Arrested/Age	Agency/Location	Offense Charged and Bail	Disposition or Next Court Date		
Probation/Parole History? <input type="checkbox"/> Yes <input type="checkbox"/> No		Where?		Any violations?	
Probation/Parole Officer's Name, Address, and Telephone No.:					
Are you a member of, or have you ever been in a gang? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Gang Name</b>		<b>Initiation Date</b>		<b>When did you get out?</b>	
Will this information bring harm to you or your family? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>INTAKE - Prior Tab</b>					
<b>Prior Failures to Appear:</b>		<b>Prior Escapes:</b>		<b>Prior Abscondings:</b>	
<b>Prior Record</b>	<b>Charges (No.)</b>	<b>Convictions (No.)</b>	<b>Drugs (No.)</b>	<b>Violent (No.)</b>	<b>Pending Cases (No.)</b>
Misdemeanors					
Felonies					
<b>INVESTIGATION - General Tab</b> (Complete when an investigation is completed)					
Docket No.: (e.g., 1:07M101 or 1:07CR101)				<b>Type of Investigation:</b> <input type="checkbox"/> Pretrial Services <input type="checkbox"/> Material Witness <input type="checkbox"/> Pretrial Diversion	
Investigation Officer:	Date Assigned:	Date Due:		Date Report Submitted:	
Temporary Duty? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Judicial Officer: (Leave blank if pretrial diversion)			<b>Jurisdictional Authority:</b> <input type="checkbox"/> Court (District Court) <input type="checkbox"/> Other District <input type="checkbox"/> Magistrate <input type="checkbox"/> U.S. Attorney (Use for PTD)		
<b>ADDITIONAL NOTES</b>					



<b>INTAKE - Opening Tab</b>			
<b>Case Activation Date:</b>	<b>Assigned Officer:</b>	<b>Juvenile?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Sealed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
Was the instant offense committed while under the criminal justice system? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Was the case diverted post-charge? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Referral Type:</b>  <input type="checkbox"/> Arrest <input type="checkbox"/> Summons <input type="checkbox"/> Verbal Notice <input type="checkbox"/> Writ-Release Not Possible	<b>Type of Case: (Intake Type)</b>  <input type="checkbox"/> Diversion <input type="checkbox"/> Material Witness <input type="checkbox"/> Pretrial Services	<b>Charging Document:</b>  <input type="checkbox"/> Citation <input type="checkbox"/> Complaint <input type="checkbox"/> Indictment <input type="checkbox"/> Information <input type="checkbox"/> Not Applicable <input type="checkbox"/> Violation Petition	
<b>Rule 5 Transfer In?</b> <input type="checkbox"/> <b>Rule 20 Transfer In?</b> <input type="checkbox"/>		<b>Courtesy In?</b> <input type="checkbox"/> Yes (Transfer district information not required)	
<b>Transfer District:</b>	<b>Transfer District Docket No.:</b>	<b>Transfer District PACTS No.:</b>	

**Arrest** is used when: 1) the defendant appears in court following an arrest, with or without a warrant, 2) the defendant turns himself/herself in or self-surrenders on a warrant. **Writ** is used when the defendant appears in federal court but remains under the jurisdiction of another agency with no eligibility for release within 90 days. **If the defendant appears pursuant to a writ but is eligible for release within 90 days, use “arrest.”** **Verbal Notice** is used when the defendant’s appearance in court is not a result of any of the above procedures—for example, if the defendant voluntarily appears in court pursuant to agreement with the government and no formal summons, warrant, or writ has been issued.

<b>INTAKE - Interview/Report Tab</b>		
<b>Interview Status:</b>  <input type="checkbox"/> Interviewed <input type="checkbox"/> Refused Interview <input type="checkbox"/> Unable to Interview	<b>When was a bail report submitted?</b> (N/A if Report Type = None)  <input type="checkbox"/> Pre-Initial Hearing <input type="checkbox"/> Pre-Detention Hearing <input type="checkbox"/> Post-Release	<b>How was the bail report submitted?</b> (N/A if Report Type = None)  <input type="checkbox"/> Oral <input type="checkbox"/> Written
<b>Report Type:</b>  <input type="checkbox"/> Full <input type="checkbox"/> Modified <input type="checkbox"/> Addendum (Rule 5) <input type="checkbox"/> None	<b>PSO Recommendations:</b>  <input type="checkbox"/> Detention <input type="checkbox"/> Release With Supervision <input type="checkbox"/> Release Without Supervision <input type="checkbox"/> No Recommendations	<b>AUSA Recommendations:</b>  <input type="checkbox"/> Detention <input type="checkbox"/> Release With Supervision <input type="checkbox"/> Release Without Supervision <input type="checkbox"/> No Recommendations
<b>Defense Counsel’s Name and Telephone No.:</b>		<b>AUSA’s Name and Telephone No.:</b>

<b>INTAKE - Offense Tab/Charged Offense</b>	
<b>Class of Offense:</b>  <input type="checkbox"/> Misdemeanor-Class A - 1 year or less but more than 6 months <input type="checkbox"/> Misdemeanor-Class B - 6 months or less but more than 30 days <input type="checkbox"/> Misdemeanor-Class C - 30 days or less but more than 5 days <input type="checkbox"/> Infraction - 5 days or less, or no imprisonment is authorized	<input type="checkbox"/> Felony-Class A - life or death <input type="checkbox"/> Felony-Class B - 25 years or more <input type="checkbox"/> Felony-Class C - Less than 25 years but 10 or more years <input type="checkbox"/> Felony-Class D - Less than 10 years but 5 or more years <input type="checkbox"/> Felony-Class E - Less than 5 years but more than 1 year
<b>Citation:</b> (In CM/ECF format)	

RELEASE/DETENTION ORDERS					
Hearing	Order Date	Release/Detention Outcome	Type of Bond (if released)	Release Date	Detained Due to/ Judge Issuing Order
Initial		<input type="checkbox"/> Released <input type="checkbox"/> Detained	<input type="checkbox"/> Collateral Bond <input type="checkbox"/> Percentage Bond <input type="checkbox"/> Personal Recognizance <input type="checkbox"/> Surety Bond <input type="checkbox"/> Unsecured Bond		<input type="checkbox"/> Temporary Detention <input type="checkbox"/> Held for Detention Hearing <input type="checkbox"/> Consent to Detention
					Judge:
Detention (if held)		<input type="checkbox"/> Released <input type="checkbox"/> Detained	<input type="checkbox"/> Collateral Bond <input type="checkbox"/> Percentage Bond <input type="checkbox"/> Personal Recognizance <input type="checkbox"/> Surety Bond <input type="checkbox"/> Unsecured Bond		<input type="checkbox"/> Preventive Detention <input type="checkbox"/> Flight <input type="checkbox"/> Danger <input type="checkbox"/> Both <input type="checkbox"/> Consent to Detention
					Judge:
PSA SUPERVISION					
Date Released to Pretrial Supervision:	Supervising Officer:	Courtesy Pretrial Services Out? <input type="checkbox"/> Yes <input type="checkbox"/> No		District Providing Courtesy Pretrial Services or Courtesy Diversion Supervision:	
PTD Months:	PTD Expiration Date:				

<b>COURT-ORDERED RELEASE CONDITIONS</b>			
<p>Check all conditions that were ordered by the court: (See PACTS Conditions Module for definitions)</p> <p style="text-align: center;"><b>TREATMENT/COUNSELING/ TRAINING-RELATED CONDITIONS</b></p> <p><input type="checkbox"/> Substance Abuse Evaluation</p> <p><input type="checkbox"/> Drug Treatment</p> <p><input type="checkbox"/> Alcohol Treatment Only</p> <p><input type="checkbox"/> Substance Abuse Testing</p> <p><input type="checkbox"/> No Tampering With Substance Abuse Testing</p> <p><input type="checkbox"/> No Illegal Use of Controlled Substances</p> <p><input type="checkbox"/> No Excessive Alcohol Use</p> <p><input type="checkbox"/> Alcohol Abstinence</p> <p><input type="checkbox"/> DNA Testing</p> <p><input type="checkbox"/> Mental Health Treatment</p> <p><input type="checkbox"/> Mental Health Evaluation</p> <p><input type="checkbox"/> Sex Offender Assessment</p> <p><input type="checkbox"/> Sex Offender Treatment</p> <p><input type="checkbox"/> Life Skills Counseling</p> <p><input type="checkbox"/> Education/Training Requirements</p> <p><input type="checkbox"/> Other Treatment/Training/Education</p>	<p style="text-align: center;"><b>SUPERVISION REPORTING/ CUSTODIAN CONDITIONS</b></p> <p><input type="checkbox"/> Third-Party Custody</p> <p><input type="checkbox"/> Pretrial Services Supervision</p> <p><input type="checkbox"/> Report Any Change of Address</p> <p><input type="checkbox"/> Personal Reporting Frequency Amount: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly</p> <p><input type="checkbox"/> Telephone Reporting Frequency Amount: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly</p> <p><input type="checkbox"/> Report to Law Enforcement</p> <p style="text-align: center;"><b>FINANCIAL/SERVICE-RELATED CONDITIONS</b></p> <p><input type="checkbox"/> Restitution</p> <p><input type="checkbox"/> Community Service</p> <p><input type="checkbox"/> Other Financial Obligations</p> <p><input type="checkbox"/> Other Service Obligations</p> <p style="text-align: center;"><b>SEARCH/SEIZURE COMPUTER CONDITIONS</b></p> <p><input type="checkbox"/> Search/Seizure</p> <p><input type="checkbox"/> Computer Search</p> <p><input type="checkbox"/> Computer/Internet Restrictions</p>	<p style="text-align: center;"><b>LOCATION/EMPLOYMENT ASSOCIATION RESTRICTIONS</b></p> <p><input type="checkbox"/> Location Monitoring Program</p> <p><input type="checkbox"/> Stand-Alone Monitoring</p> <p><input type="checkbox"/> Location Monitoring - Other</p> <p><input type="checkbox"/> Re-Entry Center - Full Time</p> <p><input type="checkbox"/> Re-Entry Center - Part Time</p> <p><input type="checkbox"/> Work Release From Secure Facility</p> <p><input type="checkbox"/> Residential Requirements/Restrictions</p> <p><input type="checkbox"/> Travel Restrictions</p> <p><input type="checkbox"/> Surrender Passport</p> <p><input type="checkbox"/> Obtain No New Passport</p> <p><input type="checkbox"/> Employment Restrictions</p> <p><input type="checkbox"/> Obtain and Maintain Employment</p> <p><input type="checkbox"/> No Contact With Victim</p> <p><input type="checkbox"/> No Contact With Minors</p> <p><input type="checkbox"/> Association Restrictions</p> <p><input type="checkbox"/> Report Contact With Law Enforcement</p> <p><input type="checkbox"/> Weapons Restrictions</p> <p><input type="checkbox"/> No Possession of Pornographic Materials</p> <p><input type="checkbox"/> Other Location/Employment/Association Restrictions</p> <p style="text-align: center;"><b>OTHER</b></p> <p><input type="checkbox"/> Other Condition:</p>	
<b>INTAKE-Closing</b>			
<b>Closing Date:</b>	<b>Disposition:</b> <input type="checkbox"/> Acquitted <input type="checkbox"/> Close-Courtesy Only <input type="checkbox"/> Deferred Judgment <input type="checkbox"/> Dismissed <input type="checkbox"/> Diversion Denied <input type="checkbox"/> Diversion Terminated by Gov't <input type="checkbox"/> Execution of Sentence <input type="checkbox"/> Found NGBRI <input type="checkbox"/> Fugitive FTA <input type="checkbox"/> Other <input type="checkbox"/> PTD Satisfied <input type="checkbox"/> Transferred Out		
<b>Transfer District:</b>	<b>Docket No.:</b>	<b>Defendant No.:</b>	<b>Voluntary Surrender Date:</b>
<b>ADDITIONAL NOTES</b>			

Check the appropriate charged classification/category/subcategory for the charged offense:					
Classification	Category	Subcategory	Classification	Category	Subcategory
Drugs <a href="#">□</a>	Continuing Criminal Ent. <a href="#">□</a>		Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	Other Drug <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Cocaine <a href="#">□</a>	Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	Other Opiate <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Heroin <a href="#">□</a>	Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	Prescription Drugs <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Marijuana <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	Cocaine <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	MDMA <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	Heroin <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Meth. <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	Marijuana <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Near a School <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	MDMA <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Other Drug <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	Meth. <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Other Opiate <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	Other Drug <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>	Prescription Drugs <a href="#">□</a>	Drugs <a href="#">□</a>	Other <a href="#">□</a>	Other Opiate <a href="#">□</a>
Drugs <a href="#">□</a>	Dist./Trafficking <a href="#">□</a>		Drugs <a href="#">□</a>	Other <a href="#">□</a>	Prescription Drugs <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Cocaine <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Cocaine <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Heroin <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Heroin <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Marijuana <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Marijuana <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	MDMA <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	MDMA <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Meth. <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Meth. <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Other Drug <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Other Drug <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Other Opiate <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Other Opiate <a href="#">□</a>
Drugs <a href="#">□</a>	Import/Export <a href="#">□</a>	Prescription Drugs <a href="#">□</a>	Drugs <a href="#">□</a>	Possession <a href="#">□</a>	Prescription Drugs <a href="#">□</a>
Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	Cocaine <a href="#">□</a>	Drugs <a href="#">□</a>	Possession While in Prison <a href="#">□</a>	
Drugs <a href="#">□</a>	Manufacture/Cultivation <a href="#">□</a>	Heroin <a href="#">□</a>	Drugs <a href="#">□</a>	Use of a Communication Facility <a href="#">□</a>	
Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	Marijuana <a href="#">□</a>			
Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	MDMA <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Access Devices <a href="#">□</a>	
Drugs <a href="#">□</a>	Manufacture/Cult. <a href="#">□</a>	Meth. <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Concealment of Assets <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Copyright Infringement <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Gambling and Lottery <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Counterfeiting <a href="#">□</a>	Currency <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Interstate Trans. <a href="#">□</a>	

Classification	Category	Subcategory	Classification	Category	Subcategory
Financial Offenses <a href="#">□</a>	Counterfeiting <a href="#">□</a>	General <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Misuse of Social Security Number <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Embezzlement <a href="#">□</a>	Bank <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Money Laundering <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Embezzlement <a href="#">□</a>	General <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Receiving Stolen Property <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Embezzlement <a href="#">□</a>	Postal <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Satellite Piracy <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Engaging in Monetary Transactions <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Structuring Transactions to Avoid Reporting <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Export/Import Monetary Instruments <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Tax <a href="#">□</a>	General <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Failure to Pay Child Support <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Tax <a href="#">□</a>	Evasion <a href="#">□</a>
Financial Offenses <a href="#">□</a>	False Claims <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Tax <a href="#">□</a>	Failure to File <a href="#">□</a>
Financial Offenses <a href="#">□</a>	False Financial Statements <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Tax <a href="#">□</a>	Liquor <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Food Stamp Violation <a href="#">□</a>		Financial Offenses <a href="#">□</a>	Tax <a href="#">□</a>	Trafficking in Contraband Cigarettes <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Forgery <a href="#">□</a>	Checks <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	Auto <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Forgery <a href="#">□</a>	General <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	Bank <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Forgery <a href="#">□</a>	Instruments/Securities <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	From Firearms Dealer <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Bank <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	General <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Bankruptcy <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	Identification Documents <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Computer <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	Identity <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Credit Card <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Theft <a href="#">□</a>	Mail <a href="#">□</a>
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	General <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Transportation of Stolen Property <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Healthcare <a href="#">□</a>	Financial Offenses <a href="#">□</a>	Worthless Checks <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Housing <a href="#">□</a>	Immigration/Customs <a href="#">□</a>	False Statement in Application of Passport <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Identity <a href="#">□</a>	Immigration/Customs <a href="#">□</a>	False Statements <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Mail <a href="#">□</a>	Immigration/Customs <a href="#">□</a>	Fraudulent Papers <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Passport <a href="#">□</a>	Immigration/Customs <a href="#">□</a>	Illegal Entry <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Securities <a href="#">□</a>	Immigration/Customs <a href="#">□</a>	Illegal Reentry <a href="#">□</a>	
Financial Offenses <a href="#">□</a>	Fraud <a href="#">□</a>	Wire <a href="#">□</a>	Immigration/Customs <a href="#">□</a>	Illegal Reentry After Deportation <a href="#">□</a>	

Classification	Category	Subcategory	Classification	Category	Subcategory
Immigration/Customs <a href="#">□</a>	Impersonation of U.S. Citizen <a href="#">□</a>		Public Order <a href="#">□</a>	Criminal Mischief <a href="#">□</a>	
Immigration/Customs <a href="#">□</a>	Misuse of Passport <a href="#">□</a>		Public Order <a href="#">□</a>	Damage to Property <a href="#">□</a>	
Immigration/Customs <a href="#">□</a>	Other Immigration <a href="#">□</a>		Public Order <a href="#">□</a>	Destruction of Mail <a href="#">□</a>	
Immigration/Customs <a href="#">□</a>	Smuggling Aliens <a href="#">□</a>		Public Order <a href="#">□</a>	Disorderly Conduct <a href="#">□</a>	
Immigration/Customs <a href="#">□</a>	Smuggling Goods Into the United States <a href="#">□</a>		Public Order <a href="#">□</a>	Environmental Violations <a href="#">□</a>	
			Public Order <a href="#">□</a>	Game Conservation Acts <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Bribery <a href="#">□</a>		Public Order <a href="#">□</a>	Interference With Flight Crew <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Contempt of Court <a href="#">□</a>		Public Order <a href="#">□</a>	Lewd Conduct <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Detention of Material Witness <a href="#">□</a>		Public Order <a href="#">□</a>	Misrepresentation of U.S. Employee <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Escape <a href="#">□</a>		Public Order <a href="#">□</a>	National Parks Violation <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Evidence Tampering <a href="#">□</a>		Public Order <a href="#">□</a>	Open Container Violation <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Failure to Appear <a href="#">□</a>		Public Order <a href="#">□</a>	Other Public Order <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	General Obstruction <a href="#">□</a>		Public Order <a href="#">□</a>	Prostitution <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Harbor Fugitive <a href="#">□</a>		Public Order <a href="#">□</a>	Public Intoxication <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Juror Tampering <a href="#">□</a>		Public Order <a href="#">□</a>	Trespassing <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Mail Obstruction <a href="#">□</a>				
Obstruction/Escape <a href="#">□</a>	Misprision of a Felony <a href="#">□</a>				
Obstruction/Escape <a href="#">□</a>	Obstruct Justice <a href="#">□</a>		Traffic/DWI <a href="#">□</a>	Driving Under the Influence <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Offense Committed While on Release <a href="#">□</a>		Traffic/DWI <a href="#">□</a>	Driving While License Suspended/ Revoked <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Perjury <a href="#">□</a>		Traffic/DWI <a href="#">□</a>	Drunken Driving <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Resisting Arrest <a href="#">□</a>		Traffic/DWI <a href="#">□</a>	General Traffic <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>	Witness Tampering <a href="#">□</a>		Traffic/DWI <a href="#">□</a>	Leaving Scene of Accident <a href="#">□</a>	
Obstruction/Escape <a href="#">□</a>			Traffic/DWI <a href="#">□</a>	Reckless Driving <a href="#">□</a>	
Public Order <a href="#">□</a>	Accessory After the Fact <a href="#">□</a>				
Public Order <a href="#">□</a>	Adulteration of Food or Drug <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Animal Cruelty <a href="#">□</a>	
Public Order <a href="#">□</a>	Civil Disorder <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Arson <a href="#">□</a>	
Public Order <a href="#">□</a>	Contraband in Prison <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Assault <a href="#">□</a>	Aggravated <a href="#">□</a>
Public Order <a href="#">□</a>	Contributing to the Delinquency of a Minor <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Assault <a href="#">□</a>	Attempted Murder <a href="#">□</a>

Classification	Category	Subcategory	Classification	Category	Subcategory
Violence/Sex Offense <a href="#">□</a>	Assault <a href="#">□</a>	General <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Murder <a href="#">□</a>	Second Degree <a href="#">□</a>
Violence/Sex Offense <a href="#">□</a>	Assault <a href="#">□</a>	Simple <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Negligent Homicide <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Assault <a href="#">□</a>	With Battery <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Possession of Child Pornography <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Assault <a href="#">□</a>	With Weapon <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Racketeering <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Bank Robbery <a href="#">□</a>	Armed <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Rape <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Bank Robbery <a href="#">□</a>	Unarmed <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Robbery <a href="#">□</a>	Armed <a href="#">□</a>
Violence/Sex Offense <a href="#">□</a>	Burglary <a href="#">□</a>	Bank <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Robbery <a href="#">□</a>	General <a href="#">□</a>
Violence/Sex Offense <a href="#">□</a>	Burglary <a href="#">□</a>	General <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Robbery <a href="#">□</a>	Motor Vehicle <a href="#">□</a>
Violence/Sex Offense <a href="#">□</a>	Burglary <a href="#">□</a>	Postal <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Robbery <a href="#">□</a>	Unarmed <a href="#">□</a>
Violence/Sex Offense <a href="#">□</a>	Burglary <a href="#">□</a>	Residential <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Sexual Abuse <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Child Exploitation <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Sexual Abuse of Minors <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Child Molestation <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Stalking <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Child Trafficking <a href="#">□</a>		Violence/Sex Offense <a href="#">□</a>	Threatening Communications <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Domestic Violence <a href="#">□</a>	Child Abuse <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Transportation for Prostitution <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Domestic Violence <a href="#">□</a>	Child Neglect <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Transportation of Minors <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Domestic Violence <a href="#">□</a>	General <a href="#">□</a>	Violence/Sex Offense <a href="#">□</a>	Violation of Restraining Order <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Domestic Violence <a href="#">□</a>	Spouse Abuse <a href="#">□</a>			
Violence/Sex Offense <a href="#">□</a>	Extortion, Threats <a href="#">□</a>		Weapons/Firearms <a href="#">□</a>	Armed Career Criminal <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Failure to Register as Sex Offender <a href="#">□</a>		Weapons/Firearms <a href="#">□</a>	Concealed Weapon <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	General Sex Offense <a href="#">□</a>		Weapons/Firearms <a href="#">□</a>	During Crime of Violence <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	General Violence <a href="#">□</a>		Weapons/Firearms <a href="#">□</a>	During Drug Offense <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Human Trafficking <a href="#">□</a>		Weapons/Firearms <a href="#">□</a>	Export of Weapons/Munitions <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Kidnaping <a href="#">□</a>		Weapons/Firearms <a href="#">□</a>	Export/Import <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Manslaughter <a href="#">□</a>	General <a href="#">□</a>	Weapons/Firearms <a href="#">□</a>	Felon in Possession <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Manslaughter <a href="#">□</a>	Vehicular <a href="#">□</a>	Weapons/Firearms <a href="#">□</a>	Import Explosives <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Murder <a href="#">□</a>	General <a href="#">□</a>	Weapons/Firearms <a href="#">□</a>	Interstate Shipment <a href="#">□</a>	
Violence/Sex Offense <a href="#">□</a>	Murder <a href="#">□</a>	First Degree <a href="#">□</a>	Weapons/Firearms <a href="#">□</a>	Other Unlawful Possession <a href="#">□</a>	

[illegible]