

## COMMUNITY SERVICE HOURS ORDERED

Defendant:

# of Hours:

Due Date:

Citation No(s):

## ITEMS TO REMEMBER

1. **YOU** are responsible for maintaining this timecard. Failure to do so may result in loss of credit for your hours already worked.
2. Your hours **MUST** be worked at a nonprofit organization. Examples: churches, libraries, food banks. Failure to do so will result in your hours not being accepted.
3. The **supervisor** at your chosen nonprofit organization must sign the time sheet to verify the hours you worked.
4. This time sheet with hours worked must be turned into the court on or **prior to your due date**.
5. The court will verify your hours worked before credit will be applied to your citation.
6. If you fail to complete all your assigned hours or you fail to return this time sheet by your due date you will be **REQUIRED** to appear in front of the Judge.
7. ***It is a Class A misdemeanor to file false information with the court.***

## COMMUNITY SERVICE AGENCY

(Must be a Nonprofit Organization)

*Please print legibly*

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

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

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

If you have any questions, please contact the  
Lake Worth Municipal Court  
817-255-7910



# LAKE WORTH MUNICIPAL COURT

## COMMUNITY SERVICE PAMPHLET AND TIME SHEET

3805 Adam Grubb  
Lake Worth, Texas 76135  
p: 817-255-7910  
f: 817-237-1211  
w: [www.lakeworthtx.org](http://www.lakeworthtx.org)  
e: [court@lakeworthtx.org](mailto:court@lakeworthtx.org)



# Lake Worth Municipal Court Community Service Time Sheet

Date	Time In	Time Out	Hours Worked	Supervisor's Signature	Defendant's Signature

**WARNING: Filing false information with the Court is a Class A misdemeanor punishable by up to one year in jail and a maximum fine up to \$4,000.**

I certify that the above record is a true representation of the actual number of hours worked for the above period.

\_\_\_\_\_  
Community Service Provider Representative Signature

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

Phone: \_\_\_\_\_

\_\_\_\_\_  
Defendant Signature

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

Hours verified by \_\_\_\_\_