



**Town of Firestone
Municipal Court
Community Service Form**

9900 Park Ave Firestone, CO 80504 303-833-0811

Defendant:	Case Number:
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Community Service Information Sheet

1. You have _____ hours of community service to complete
2. Community service hours must be completed at a **non-profit organization**
3. On the back is a form to be completed by you and the organization where you complete the community service. Please make sure the form is completed in its entirety including the contact information of the organization. **COMMUNITY SERVICE HOURS WILL BE VERIFIED. If fraudulent hours are submitted, additional charges may be filed against you.**
4. Verification of completion to be filed by _____
or return to court on _____

I understand that if I fail to complete my community service by the date of completion, a bench warrant may be issued for my arrest.

Signature:			
Address:	City:	State:	Zip:
Phone:	Email Address:		

