## IN THE CIRCUIT COURT OF CLAY COUNTY, MISSOURI SEVENTH JUDICIAL CIRCUIT, DIVISION \_\_\_\_\_ PROBATION ORDER

	Case No		Offense		
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Defendant			DOB	_ SS No	
Address				Race/Sex	
Sentence: () SIS or () SES	on	hours/days Jail	Duration	(Yrs.) (Mos.)	
or until you have proven by your the Court may at any time revok	r conduct, to the satisfac ke or modify any conditi npose or order execution	tion of this Court, that you are ions of the probation, and you	entitled to discharge from this probable subject to arrest upon o	n probation for such period of time as stated herobation. You are hereby advised that under the order of the Court. At any time within the period laws of the State of Missouri, and commit you	e law od of
PROBATION SUPERVISE	D BY: ( ) AD	P () NDS	( ) MO. PP	( ) COURT	
				ative Probation Officer, or to the Court. That ound take such action as the Court may require.	
You are subject to the following	general conditions (1-6	6), and special conditions whi	ch are checked, as follows:		
<del>_</del>		•	es. I will report any arrest to my od test upon the request of a Law	Probation Officer within 48 hours. This includes Enforcement Officer.	udes
2. RESIDENCE: I will not	tify my Probation Offic	er of any changes in residence	e in writing within 7 days.		
3. EMPLOYMENT: I will from a program, I will notify	•	· · · · · · · · · · · · · · · · · · ·	cer before quitting my job or pro	ogram. In the event I lose my job or am termin	nated
<ol> <li>ASSOCIATION: I will nassociating.</li> </ol>	not associate with any po	erson who has been convicted	or placed on probation for a felo	ony. It is my responsibility to know with whom	I am
5. DRUGS: I will not posses	ss or use any controlled	substances except as prescrib	ped for me by a licensed medical	l practitioner.	
6. REPORTING/DIRECT	IVES: I will report as d	directed to my Probation Office	cer, I agree to abide by any direc	tives given to me by my Probation Officer.	
7. ( ) JAIL TIME: I will se	ervehours/day	s in the Clay County Jail. Jail	time to commence at	m. on	
8. ( ) COMMUNITY SER	RVICE: I will perform			sion of Northland Alternative Service Program en me concerning same, and pay the fees.	m or
9 ( ) ELECTRONIC SHA	ACKLING: I will serve	edays on house arres	st and pay the fees.		
to. ( ) IGNITION INT	ERLOCK: I will have	an Ignition Interlock device in	nstalled on any vehicle that I ope	erate during the period of probation, and pay	the
tt. ( ) SCHOOL: I will con	nplete S.A.T.O	.P V.I. <b>P.</b>	Defensive Driving School	Y.T.O.P. and pay the fees.	
12. ( ) COSTS: I will pay	all fines, costs and fees	associated with this and any	companion cases on or before_	at (9:00 a.m.) (1:30 p	o.m.)
Failure to appear on the contempt of Court and/or			hy I cannot pay will result in a w	varrant for my arrest and possibly jail sentence	e for
13. ( ) REPORT: I will repo	ort to the Court as order	red. First Report		at (9:00 a.m.) (1:30 p.m.)	
14. ( ) SPECIAL CONDIT	IONS:				
I have read or have had read to r	me the Order of Probati	ion and the Conditions set out	herein I garee to comply with s	such conditions during the period of my proba	ition
					OII.
Jaie:	Del	rendant:			—

So Ordered: Judge: \_\_\_\_\_