

Eddie Connelly
Justice of the Peace



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COMMUNITY SERVICE REFERRAL LETTER

*Docket #: _____ *Name: _____

TO THE DEFENDANT:

COURT ORDERED COMMUNITY SERVICE HOURS MUST BE COMPLETED WITH A 501(C)(3) NON-PROFIT ORGANIZATION. FOR-PROFIT ORGANIZATIONS DO NOT QUALIFY. COMMUNITY SERVICE MAY NOT BE COMPLETED ONLINE.

To be completed by the community service organization:

NAME OF ORGANIZATION: _____

IRS 501(c)(3) Tax ID: _____

ADDRESS: _____

CONTACT PHONE NUMBER: _____

This letter is to confirm that the above named person completed _____ hours of community service on _____, 20_____.

*PRINT NAME OF SUPERVISOR: _____

*SUPERVISOR SIGNATURE: _____

**IT IS THE DEFENDANT'S RESPONSIBILITY TO RETURN
THIS FORM TO THE COURT.**

**Thank you for your participation. Please call the court if you have any
questions about our community service program.**