



Downtown  
525 N. Main, Suite 235  
Wichita, Kansas 67203

**Office of the District Attorney**  
**18<sup>th</sup> Judicial District of Kansas**

Juvenile  
1900 E. Morris  
Wichita, Kansas 67211

---

**COMMUNITY SERVICE VERIFICATION**

This is to certify that \_\_\_\_\_ (*name*) has completed community service hours with \_\_\_\_\_ (*agency name*), \_\_\_\_\_ (*agency address*), \_\_\_\_\_ (*agency phone*).

Dates and hours worked are as follows:

<b>DATE</b>	<b>HOURS WORKED</b>	<b>SUPERVISOR SIGNATURE</b>

I declare under the laws of the State of Kansas that the foregoing is true and correct.

Executed on this date, \_\_\_\_\_ .

\_\_\_\_\_  
Supervisor's Signature