



Adult Diversion
Sedgwick County Courthouse
525 N. Main, Ste 235
Wichita, KS 67203

Office of the District Attorney
18th Judicial District

Telephone: (316) 660-3663
Fax: (316) 660-3674
Toll Free: (800) 432-6878

MONTHLY REPORT - ALCOHOL

Return completed, **signed** report form

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Living with: _____
Name and Relationship (Spouse, Parent, Friend, etc)

Present Employer or School: _____
Address: _____
What kind of work do you do? _____
Wages per hour, day, week or month? _____

Other sources of income: _____

Days absent from work or school, excluding weekends and holidays, and reason for absence:

Indicate whether payments are accompanying this report by placing a check mark next to type of payment and writing in amount of payment:

- Alcohol/Drug Safety Active Program Fee.....\$
- Fine.....\$
- Jail Processing Fee.....\$
- Attorney Fee.....\$
- Lab Fee.....\$

Have you been arrested, stopped, questioned, ticketed, or had any contact with a law enforcement officer since your last report? Yes No

If yes, explain: _____

Which forms do you need more of? Check all that apply:
 Report forms Alcoholics Anonymous Forms Community Service Forms

Date: _____

Signature _____

If you have renewed your motor vehicle insurance within the last month, please attach a copy of your new proof of insurance.

If there is anything you wish to discuss with your Program Coordinator, please call 660-3663

Additional Comments:

Return to: District Attorney's Office, Adult Diversion
525 N. Main, Ste 235, Wichita KS 67203