

# PRETRIAL DIVERSION PROGRAM

District Attorney's Office  
Cobb Judicial Circuit

## MONTHLY REPORT FORM

Print name \_\_\_\_\_

Date of report \_\_\_\_\_, 20\_\_\_\_\_

1) Indicate below any changes in your address, employment or other information since your last report:

If none, check here

Address \_\_\_\_\_  
Street Apt# City State ZIP

Telephone(s): (\_\_\_\_)\_\_\_\_-\_\_\_\_ (\_\_\_\_)\_\_\_\_-\_\_\_\_

E-mail address(es): \_\_\_\_\_

Place of employment \_\_\_\_\_

Telephone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Supervisor's name \_\_\_\_\_

If unemployed give reason why \_\_\_\_\_

2) Have you violated any laws, received any traffic citations or been arrested since the signing of the Diversion Agreement? \_\_\_\_\_

**If yes, you must include a separate letter explaining the circumstances of your arrest or citation.**

3) Current paycheck stub is attached. \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Participant's signature \_\_\_\_\_

Due on or before the **1st** of each month:

Cobb County District Attorney's Office  
Attention: Pretrial Diversion Program  
70 Haynes St., Marietta, GA 30090

e-mail: [pretrialdiversion@cobbcounty.org](mailto:pretrialdiversion@cobbcounty.org)  
Fax: 770-528-3035