



## Wauwatosa Municipal Court

7725 W. North Avenue  
Wauwatosa, WI 53213  
Phone: 414-471-8488 Fax: 414-479-8999  
Email: tcourt@wauwatosa.net

### COMMUNITY SERVICE COMPLETION FORM

Agency / Organization: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Community Service Hours Ordered: \_\_\_\_\_ To be completed by \_\_\_\_\_

| Date | Hours | Work performed | Signature of Supervisor |
|------|-------|----------------|-------------------------|
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |
|      |       |                |                         |

Total Hours Completed: \_\_\_\_\_

*To be completed by entity:*

This confirms that \_\_\_\_\_ has successfully performed \_\_\_\_\_ hours

\_\_\_\_\_  
Agency/Organization

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Position

\_\_\_\_\_  
Phone