



**CUMBERLAND COUNTY**  
***Adult Probation and Parole Department***  
*4 E. Liberty Avenue, Carlisle, PA 17013*

**Community Service Attendance Log**

Client Name: \_\_\_\_\_

Hours Required: \_\_\_\_\_

File #: \_\_\_\_\_

Completion Deadline: \_\_\_\_\_

Restrictions/Comments: \_\_\_\_\_

**Probation Officer Information**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Date	Hours	Supervisor Signature	Date	Hours	Supervisor Signature

Total Number of Hours Completed: \_\_\_\_\_

Please notify probation officer regarding any problems immediately. Return completed log to:

**Cumberland County Adult Probation**  
**4 E. Liberty Avenue**  
**Carlisle, PA 17013**

Client Signature: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

*"Serving our Community...Advancing our Profession"*