

PS 2 (Rev. 9/92) UNITED STATES DISTRICT COURTS WORKSHEET FOR PRETRIAL SERVICES REPORT	DOCKET NUMBER (1-4)	Circuit	District	Office	Year	Number	Defendant
	5. INTERVIEW STATUS A. Interviewed <input type="checkbox"/> B. Refused Interview <input type="checkbox"/> C. Not Interviewed D. Not Applicable		6. INTERVIEW DATE		7. INTERVIEW TIME		8. INTERVIEW OFFICER
9. COURT NAME (LAST, FIRST, MIDDLE)	10. REFERRAL ACTION A. Arrest <input type="checkbox"/> B. Non-Arrest X. Not Applicable		11. TYPE OF CASE A - Complaint B - Indict/Info C - Material Witness E - Other F - Superceding G - Collateral H - PSA Courtesy T - Transfer In <input type="checkbox"/>				
TRUE NAME	12. RULE 20/40 TRANSFER YES <input type="checkbox"/> NO <input type="checkbox"/>		12A. TRANSFER DATE		13. RECEIVE/LOSE DISTRICT		
AKA	14. SEX	15. DOB		AGE			
MAIDEN NAME	HEIGHT	WEIGHT	EYES	HAIR	SCARS/TATOOS		
USM REG. #: _____ FBI #: _____ STATE #: _____ SHERIFF'S #: _____ CITY P.D. #: _____ OTHER #: _____	16. SOCIAL SECURITY NO.				DRIVER'S LICENSE NO.		
	17. RACE W - White <input type="checkbox"/> B - Black <input type="checkbox"/> I - American Indian or Alaskan Native A - Asian /Pacific Islander X - Unknown				18. TIME IN AREA <input type="checkbox"/> Months		
					19. CITIZENSHIP A. U.S. Citizen <input type="checkbox"/> B. Legal Alien C. Illegal Alien X. Unknown		
20. RESIDENTIAL STATUS <input type="checkbox"/> A. Own/Buying <input type="checkbox"/> B. Renting <input type="checkbox"/> C. No Contribution <input type="checkbox"/> D. No Place To Live <input type="checkbox"/> O. Other <input type="checkbox"/> X. Unknown	17A. HISPANIC ORIGIN HH - Hispanic <input type="checkbox"/> NN - Not Hispanic XX - Unknown				CITIZEN OF:		BIRTHPLACE
PRESENT ADDRESS (Including Apt. #)	ALIEN NO.		ENTERED U.S.			PASSPORTS/VISAS	
EVER LIVED OUTSIDE OF STATE/COUNTRY?	DOES THE DEFENDANT TRAVEL OUTSIDE OF U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/> WHERE?						
HOW LONG AT THIS ADDRESS?	NOTES:						
LIVES WITH:	MONTHLY PAYMENTS			LEASE IN WHOSE NAME?			
	UTILITIES IN WHOSE NAME?						
PRIOR ADDRESS	PRIOR ADDRESS						
PRIOR ADDRESS	PRIOR ADDRESS						
PRIOR ADDRESS	PRIOR ADDRESS						

FINANCIAL INFORMATION

LIST FINANCIAL ASSETS	LIST FINANCIAL LIABILITIES
<p>CASH ON HAND</p> <p>SAVINGS ACCT(S) (Where?) _____ \$ _____</p> <p>CHECKING ACCT(S) (Where?) _____ \$ _____</p> <p>STOCKS/BONDS _____ \$ _____</p> <p>IRA'S _____ \$ _____</p> <p>(NOTE OTHER ACCOUNTS BELOW)</p> <p>AUTO: MAKE _____ MODEL _____ YR _____ \$ _____</p> <p>AUTO: MAKE _____ MODEL _____ YR _____ \$ _____</p> <p>(NOTE OTHER AUTOS BELOW) \$ _____</p> <p>REAL ESTATE</p> <p>DESCRIPTION (INCLUDE ADDRESS)</p> <p>DOWN PAYMENT \$ _____</p> <p>ASSESSED VALUE \$ _____</p> <p>MARKET VALUE \$ _____</p> <p>EQUITY \$ _____</p> <p>(NOTE OTHER REAL ESTATE BELOW)</p> <p>PERSONAL PROPERTY (Jewelry, Collections, etc.) \$ _____</p> <p>LIFE INSURANCE (Surrender Value) \$ _____</p> <p>OTHER ASSETS-INCOME SOURCE \$ _____</p> <p>SPOUSE INCOME \$ _____</p> <p>SPOUSE OCCUPATION _____</p>	<p>MORTGAGE</p> <p>NAME OF BANK OR MORTGAGE COMPANY _____</p> <p>ORIGINAL LOAN _____</p> <p>PRESENT BALANCE _____</p> <p>MONTHLY PAYMENTS _____</p> <p>(NOTE OTHER MORTGAGES BELOW:) _____</p> <p>OUTSTANDING LOAN APPLICATIONS? _____</p> <p>PERSONAL LOANS</p> <p>NAME OF LENDER _____</p> <p>ORIGINAL LOAN _____</p> <p>PURPOSE OF LOAN _____</p> <p>PRESENT BALANCE _____</p> <p>MONTHLY PAYMENT _____</p> <p>(NOTE OTHER LOANS BELOW) _____</p> <p>CREDIT CARDS:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>ALIMONY _____</p> <p>CHILD SUPPORT _____</p> <p>COURT ORDERED OR VOLUNTARY? _____</p> <p>MEDICAL BILLS _____</p> <p>INSURANCE PREMIUMS _____</p> <p>COURT FINES OR RESTITUTION _____</p> <p>RENT _____</p> <p>UTILITIES _____</p> <p>OTHER DEBTS OR MONTHLY EXPENSES _____</p> <p>_____</p> <p>_____</p> <p>EVER FILE FOR BANKRUPTCY? YES <input type="checkbox"/> NO <input type="checkbox"/></p>

ADDITIONAL DATA

<p>23. EDUCATION</p> <p>HIGHEST GRADE ACHIEVED</p> <p>EL - Elementary HS - High School Grad</p> <p>SH - Some High School SC - Some College</p> <p>VC - Vocational School CG - College Grad</p> <p>GE - G.E.D. PG - Post Grad</p> <p>NL - No Education XX - Unknown</p>	<p>MILITARY SERVICE</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">SERVICE NUMBER</td> <td>BRANCH OF SERVICE</td> </tr> <tr> <td>HIGHEST RANK HELD</td> <td>RANK AT SEPARATION</td> </tr> <tr> <td>DATE OF ENTRY</td> <td>DATE DISCHARGED</td> </tr> <tr> <td colspan="2">TYPE OF DISCHARGE</td> </tr> </table> <p>VA CLAIM NUMBER</p> <p>DECORATIONS AND AWARDS</p> <p>EVER COURT-MARTIALED?</p>	SERVICE NUMBER	BRANCH OF SERVICE	HIGHEST RANK HELD	RANK AT SEPARATION	DATE OF ENTRY	DATE DISCHARGED	TYPE OF DISCHARGE	
SERVICE NUMBER	BRANCH OF SERVICE								
HIGHEST RANK HELD	RANK AT SEPARATION								
DATE OF ENTRY	DATE DISCHARGED								
TYPE OF DISCHARGE									
<p>NAME AND LOCATION OF SCHOOLS</p>									

HEALTH

PHYSICAL HEALTH: (Name of Doctor), health problems, present treatment and medication

DRUG/ALCOHOL ABUSE

(Age use began, frequency, cost, type of drug, past and present treatment)

24. SUBSTANCE ABUSE (within last 2 years)

- N - No Substance Abuse
- X - Unknown
- A - Heroin
- C - Cocaine
- D - Barbiturates
- E - Amphetamines
- F - Marijuana
- I - Alcohol
- J - Other Illegal Substances

MENTAL HEALTH

Name and address of doctor or counselor; and condition under treatment

25. DEFENDANT presently undergoing psychiatric treatment

Y - Yes N - No X - Unknown

Defendant presently on medication?

History of psychiatric care?

Other mental health treatment?

CRIMINAL HISTORY

UNOFFICIAL VERSION OF PRIOR RECORD (List below all arrests and whether convicted, including juvenile adjudication)

DATE	AGE	OFFENSE CHARGED AND BAIL	COURT	DISPOSITION OR NEXT COURT DATE

Defendant presently on PROBATION?

YES NO

Defendant presently on PAROLE?

YES NO

Where?

Parole/Probation Officer's Name and Address

VERIFIED CRIMINAL HISTORY (Complete After Record Check)

26. CRIMINAL HISTORY STATUS A – No Criminal History B – No Pending Matters C – Currently on Pretrial Release D – Currently on Parole/Supervised Release E – Currently on Supervised Probation F – Escape or Walkoff Status G – Immigration Status in Question K – Outstanding Misdemeanor Warrant L – Outstanding Felony Warrant M – Pretrial Release and 1 of the Above N – More than 1 Excluding Pretrial Release O – Other	NUMBER OF PENDING CASES 27. Felonies <input type="checkbox"/> 28. Misdemeanors <input type="checkbox"/> PRIORS WHILE ON PRETRIAL RELEASE (NUMBER OF) 29. Arrests <input type="checkbox"/> 30. Convictions <input type="checkbox"/> PRIOR RECORD OF (NUMBER OF) 31. FTA's <input type="checkbox"/> 32. Escapes/Walkoffs <input type="checkbox"/> 33. Absconding from Bond, Probation, Parole or Supervised Release Supervision <input type="checkbox"/> 34. Revocation of Conditional Release <input type="checkbox"/>
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PRIOR RECORD	ARRESTS (Number)	CONVICTIONS (Number)	VIOLENT (Number)	DRUGS (Number)
MISDEMEANORS	35.	36.	37.	38.
FELONIES	39.	40.	41.	42.

NOTES:

ARREST INFORMATION

43. ARREST DATE	44. ARREST TIME	OFFENSE CHARGED	45. MAJOR CHARGED OFFENSE KEY
CASE AGENT'S NAME AND TELEPHONE		VIOLENCE ALLEGED?	
DESCRIPTION OF OFFENSE		RESISTING ARREST?	

BAIL REPORTS AND RECOMMENDATIONS

46. PRETRIAL SERVICES OFFICER RECOMMENDATIONS D – Detention F – Financial N – Non-Financial X – No Recommendations	47. AUSA RECOMMENDATIONS D – Detention F – Financial N – Non-Financial X – No Recommendations
48. JUDICIAL OFFICER NAME AND CODE (AT INITIAL HEARING) <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	49. TYPE OF REPORT A. Prebail With Recommendation at Initial Hearing B. Prebail Without Recommendation at Initial Hearing C. Post Bail D. No Report Submitted E. Other
COUNSEL'S NAME AND TELEPHONE	AUSA'S NAME AND TELEPHONE

NOTES:

BAIL HEARINGS SECTION

HEARING HELD	DATE	TIME	CONDITIONS IMPOSED	ACTION TAKEN
Initial Hearing	50.	51.	52. <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 08-10 <input type="checkbox"/> 11-13	53. <input type="checkbox"/>

TYPE OF HEARING	HEARING CODE	DATE	CONDITIONS IMPOSED	ACTION TAKEN
Initial Detention or 1 st Review	54.	55.	56. <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 08-10 <input type="checkbox"/> 11-13	57. <input type="checkbox"/>

HEARING HELD CODES	CONDITION IMPOSED CODES	ACTION TAKEN CODES
DH – Detention Hearing BR – Bail Review Hearing RC – Review at Conviction RS – Review at Sentence RA – Review at Appeal RV – Bail Violation Review JO – Judicial Order NO – No Hearing Held	1 – Personal Recognizance 2 – Unsecured Bond 3 – Percentage/Cash Bond 4 – Collateral Bond 5 – Corporate Surety 6 – PSA Supervision 7 – 3 rd Party Custody 08 – Restrictive Conditions 09 – Special Conditions (See 65) 10 – Restrictive and Special 11 – Bail Not Set 12 – Preventive Detention 13 – Temporary Detention	A – Released/Bail Made B – Delayed Release/Bail Made C – Detained/Bail Not Made D – Detained/Bail Not Set E – Detained/Temporary Detention (Initial Hearing Only) P – Detained/Preventive Detention (Detention Hearing Only) F – Continued/AUSA (Initial Hearing Only) G – Continued/Counsel (Initial Hearing Only) H – Det Hearing Held Same Day (Initial Hearing Only) K – Det Hearing Held Another Day (Initial Hearing Only) I – Case Dismissed L – Case Transferred Out of District

58. MOTION FOR DETENTION (MADE AT INITIAL HEARING)
 A – No Motion B – Yes, AUSA
 C – Yes, Court D – Yes, Later Dropped

59. PRESUMPTION OF DETENTION MADE BY JUDICIAL OFFICER
 A. No
 B. Yes, violent crime, capital offense or 10-year drug felony while on pretrial release last 5 years.
 C. Yes, probable cause to believe defendant committed 10-year drug felony or had 18 USC 924(c) violation.

60. DETENTION ORDERED AT INITIAL DETENTION HEARING
 A. No B. Yes, flight risk C. Yes, danger to witness D. Yes, danger to community E. Yes, flight and danger

61. TEMPORARY DETENTION IMPOSED BY JUDICIAL OFFICER AT INITIAL HEARING
 A. No B. Yes–Defendant on pretrial release for a felony. C. Yes–Defendant on probation or parole.
 D. Yes–Defendant is an undocumented alien.

PSA SUPERVISION AND SPECIAL CONDITIONS

62. RELEASED UNDER PSA SUPERVISION A – At Initial Hearing B – At Initial Detention Hearing <input type="checkbox"/> C – At Bail Review Hearing N – Not Released on PSA Supervision	63. LEVEL OF SUPERVISION IMPOSED H – High L – Low X – Not Applicable <input type="checkbox"/>	64. IMPOSED BY A. Court B. PSO Discretion X. Not Applicable <input type="checkbox"/>
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65. SPECIAL CONDITIONS IMPOSED 0 – No Conditions 4 -- Shelter Placement 1 – Substance Abuse Testing 5 -- House Arrest 2 – Substance Abuse Treatment 6 -- Electronic Monitoring 3 – Substance Abuse Testing and Treatment 7 -- Mental Health Treatment 8 -- Other Conditions Not Listed	66. SUPERVISION DISTRICT <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td align="center">CIR</td> <td align="center">DIST</td> <td align="center">CIR</td> <td align="center">DIST</td> </tr> </table>					CIR	DIST	CIR	DIST
CIR	DIST	CIR	DIST						

END OF PSA FILING DATA

TYPE OF HEARING	HEARING HELD CODES	DATE	REPORT MADE (Y/N)	CONDITIONS IMPOSED						ACTION TAKEN	
REVIEW	67.	68.	69.	70.	<input type="checkbox"/>	71.					
					1-2	3-5	6	7	08-10	11-13	
REVIEW	72.	73.	74.	75.	<input type="checkbox"/>	76.					
					1-2	3-5	6	7	08-10	11-13	
REVIEW	77.	78.	79.	80.	<input type="checkbox"/>	81.					
					1-2	3-5	6	7	08-10	11-13	
REVIEW	82.	83.	84.	85.	<input type="checkbox"/>	86.					
					1-2	3-5	6	7	08-10	11-13	
REVIEW	87.	88.	89.	90.	<input type="checkbox"/>	91.					
					1-2	3-5	6	7	08-10	11-13	

HEARING HELD CODES	CONDITIONS IMPOSED CODES	ACTION TAKEN CODES
DH – Detention Hearing BR – Bail Review Hearing RC – Review at Conviction RS – Review at Sentence RA – Review at Appeal RV – Bail Violation Review JO – Judicial Order NO – No Hearing Held	1 – Personal Recognizance 2 – Unsecured Bond 3 – Percentage/Cash Bond 4 – Collateral Bond 5 – Corporate Surety 6 – PSA Supervision 7 – 3 rd Party Custody 08 – Restrictive Conditions 09 – Special Conditions (See 65) 10 – Restrictive and Special 11 – Bail Not Set 12 – Preventing Detention 13 – Temporary Detention	A – Released/Bail Made B – Delayed Release/Bail Made C – Detained/Bail Not Made D – Detained/Bail Not Set P – Detained/Preventive Detention

BAIL VIOLATIONS

92. VIOLATION COMMITTED (Y/N)	<input type="checkbox"/>
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VIOLATION	TYPE	INVOLVED	WHEN OCCURRED	HEARING HELD
93. FIRST	93a. <input type="checkbox"/>	93b. <input type="checkbox"/>	93c. <input type="checkbox"/>	93d. <input type="checkbox"/>
	A – Felony B – Misdemeanor C – FTA D – Restrictive Conditions E – Special Conditions F – Other	A – N/A B – Drugs C – Violence D – Weapons E – Reporting F – Travel G – Electronic Monitoring H – Residential Treatment	A. Pre-Adjudication B. Pre-Sentence C. Pending Appeal or Surrender	A. No B. Yes – Detained C. Yes – CC D. Yes – NC
94. SECOND	94a. <input type="checkbox"/>	94b. <input type="checkbox"/>	94c. <input type="checkbox"/>	94d. <input type="checkbox"/>
95. THIRD	95a. <input type="checkbox"/>	95b. <input type="checkbox"/>	95c. <input type="checkbox"/>	95d. <input type="checkbox"/>

DETENTION SUMMARY

PERIOD	DETAINED (Y/N)	DAYS/COST TO REPORT (Y/N)	NUMBER OF DAYS	TOTAL COST
Before Initial Hearing	96.	97.	98.	99.
After Initial Hearing	100.	101.	102.	103.
Post Adjudication	104.	105.	106.	107.

DISPOSITION SUMMARY

108. DISPOSITION DATE	109. TERMINATION DATE	110. DISPOSITION CODE
		D -- Dismissed A -- Acquitted C -- Convicted O -- Other G -- Pled Guilty J -- Closed by Transfer B – Convicted/Fine Only P – Pretrial Diversion E – Escape From Custody F – Fugitive/FTA H – Courtesy Supervision Closing
111. MAJOR CONVICTED OFFENSE CODE		<input type="checkbox"/>