

State of Nebraska \_\_\_\_\_ ,  
Plaintiff,  
vs.  
\_\_\_\_\_  
Defendant.

Case No. \_\_\_\_\_

**NOTIFICATION OF  
INTERSTATE COMPACT  
PROBATION END  
AND FEE REDUCTION**

Full Name:	Date of Birth:	
Address:		
Sending State Name:		
Probation Start Date:	Probation End Date:	
Sending State Case #		
Transfer Date:	County of Supervision:	
Original Probation Term:	Release Type:	
Actual Number of Months of Supervised:		
<b>Enrollment Fee (\$30 one-time fee)</b>		
Assessed:	Paid to Date:	Owed:
<b>Monthly Supervision Fees (\$25 per month of supervision)</b>		
*Assessed:	Paid to Date:	Owed:
**Reduce Judgment to: _____		
<b>Drug Testing Fees (\$5 per month)</b>		
*Assessed:	Paid to Date:	Owed:
**Reduce Judgment to: _____		

\*Calculated, anticipated fees for months supervised in Nebraska.

\*\*Fees for months supervised in Nebraska.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
of Probation Officer  
Printed Name: \_\_\_\_\_  
Street Address/P.O. Box: \_\_\_\_\_  
City/State/ZIP Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_