

ANNUAL OPERATIONS REPORT WORKSHEET

THIS REPORT COVERS THE PERIOD OF JAN. 1, 2020 - DEC. 31, 2020

COUNTY: _____
 COURT(S): _____
 COURT(S) I.D.: _____
 PREPARED BY: _____
 DATE PREPARED: _____
 EMAIL ADDRESS: _____
 TELEPHONE: _____
 JUDGE(S): _____
 CPO: _____



INDIANA OFFICE OF COURT SERVICES

1. Is your probation department the only probation department in your county?

YES _____ NO _____

2. If the answer to question (1) is no, what other court(s) have probation departments?

3. Does your department request and submit to the county council a budget separate from your court?

YES _____ NO _____

NOTE: If the answer to question (3) above is yes, your department or court must also file a Report on Court Expenditures and Budget with the Indiana Supreme Court indicating the appropriate probation expenditures. The report can be found at:

www.courts.in.gov

4. Please list the following: (1) position or title of the Chief Probation Officer and position or titles of all other probation officers, clerical personnel, and other persons employed by the probation department; (2) the total number of employees being compensated at this yearly salary or wage; (3) yearly salary or wage SPENT on each position during the preceding calendar year regardless of whether funds come from appropriations or user fees; (4) number of employees in column 2 multiplied by the the salary indicated in column 3; and (5) whether the position is full or part time.

NOTE: Please list the position or title in appropriate category, not the name of the employee.

(1) Title/Position	(2) Number of Employees	(3) Salary	(4) Total of Salaries/ Benefits	(5) Full/Part Time (Y/N)
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Chief Probation Officer: _____ \$ _____ - _____

Other Probation Officers:

_____	_____	_____	\$ _____ - _____	_____
_____	_____	_____	\$ _____ - _____	_____
_____	_____	_____	\$ _____ - _____	_____
_____	_____	_____	\$ _____ - _____	_____
_____	_____	_____	\$ _____ - _____	_____

(1) Title/Position	(2) Number of Employees	(3) Salary	(4) Total of Salaries/ Benefits	(5) Full/Part Time (Y/N)
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Clerical Personnel:

_____	_____	_____	\$ -	_____
_____	_____	_____	\$ -	_____
_____	_____	_____	\$ -	_____

Other Personnel:

_____	_____	_____	\$ -	_____
_____	_____	_____	\$ -	_____
_____	_____	_____	\$ -	_____

Fringe Benefits:

Total of fringe benefits paid for salaried employees

\$ -

Total

\$ -

5. What is the total amount of restitution collected in your county during the 2020 calendar year?

\$ _____

The probation salaries reflected on this report should be consistent with the probation expenditures reflected on the court's Report on Court Expenditures and Budget or the Probation's Expenditure and Budget Report if the probation department answers yes to question 3 above. **Before submitting your report, please verify the figures reported on this form with the figures reported on the court's or probation department's Report on Court Expenditures and Budget.**

Copies of this worksheet are also available on-line at:

www.courts.in.gov

To obtain your ICOR password, please contact the Trial Court Technology Help Desk at 1-888-275-5822