

# SUPERVISION ORIENTATION HANDBOOK

## UNITED STATES DISTRICT COURT DISTRICT OF KANSAS PROBATION AND PRETRIAL SERVICES OFFICE



**You are assigned to:**

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**U.S. Probation Officer**

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**Officer's Direct Telephone Number**

Office Hours  
8:00 a.m. - 5:00 p.m.

**Kansas City Office**

U.S. Courthouse & Federal Building  
500 State Avenue, M35  
Kansas City, KS 66101-2431  
913-735-2400  
Fax: 913-735-2402  
Toll Free: 1-888-224-2545

**Topeka Office**

U.S. Courthouse & Federal Building  
444 S.E. Quincy, Rm. 375  
Topeka, KS 66683-3589  
785-338-5600  
Fax: 785-338-5601  
Toll Free: 1-888-400-8803

**Wichita Office**

U.S. Courthouse & Federal Building  
401 N. Market, Rm. 308  
Wichita, KS 67202-2011  
316-315-4400  
Fax: 316-315-4401  
Toll Free: 1-888-224-1458

[www.ksp.uscourts.gov](http://www.ksp.uscourts.gov)

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# INTRODUCTION

As part of your sentence, you will be supervised in the community by a U.S. Probation Officer. Your supervision may be either probation, supervised release, or parole. In any event the conditions will be essentially the same. The purpose of supervision is to enforce compliance with the conditions of release, protect the public by minimizing risk, and to provide services to you to assist you in maintaining a law-abiding lifestyle.

United States Probation Officers serve as officers of the court, agents of the U.S. Parole Commission, Military Parole Authorities, and Bureau of Prisons. They are responsible for the supervision of all persons conditionally released to the community by the courts, the Parole Commission, Federal Bureau of Prisons, and Military Authorities. The probation officer is expected to hold individuals accountable to the general conditions and any special conditions ordered by the releasing authority.

To accomplish these objectives, the probation officer assigned to you has the following responsibilities:

- \* To instruct you as to the conditions specified by the court or the Parole Commission.
- \* To keep informed as to your compliance with the conditions of supervision.
- \* To keep informed as to your conduct and to report your conduct and situation to the sentencing court or Parole Commission.
- \* To use all suitable methods, consistent with the conditions specified by the court, to bring about improvements in your conduct and situation.
- \* To assess the level of risk you may pose to the community and establish a supervision plan to minimize your risk to the community.
- \* To manage risks and supervision activities, such as: verification of employment and sources of income; investigation of your financial situation; monitor your associations; conduct records checks; place restrictions on your travel; and, if ordered, drug testing.
- \* To request modification of the conditions of supervision, when necessary, to reduce risk. Such modifications can include home detention, community confinement, urinalysis or substance abuse treatment, and requirements for financial disclosure.
- \* To systematically review your conduct and your situation and revise your supervision plan in accordance with changes in your level of risk to the community.
- \* To assess problems, you may be experiencing that are likely to be associated with future criminal conduct, such as drug addiction, unemployment, drug problems, alcohol problems, financial problems, lack of residence, or family problems, and develop a plan to address these problems.
- \* To refer you to community resources to assist you in dealing with these problems.

One purpose of the orientation manual is to thoroughly explain the conditions, the purpose for each condition, and what is required of you to be in compliance with each condition. This packet will also provide some general information about issues that pertain to your conviction or supervision.

***Any questions about this information should be directed to your U.S. Probation Officer.***

# **DISTRICT OF KANSAS**

## **"Supervision Designed for You"**

History and research have shown that many times, probation officers (PO) tend to provide supervision in the same manner, regardless of the individual's needs or risk to the community. This means that some are being over-supervised by the PO and others are under-supervised. This does not help you and can be counter-productive to your success. To provide the best supervision and promote community adjustment and success, the District of Kansas has initiated a system-wide shift as to how you will be supervised in the District of Kansas.

### **What does this mean for you, the newly released offender to supervision?**

Supervision in Kansas will be tailored to your needs. At the beginning of supervision, you will be asked to complete a post-conviction risk assessment (PCRA) questionnaire. The assessment takes into consideration your past criminal history, education and employment history, substance abuse, companions and cognitions. Your case will then be designated as high, moderate, low-moderate, or low. You will have personal interaction with your assigned officer to help assist you in the transition from custody (or on probation) and to ensure your stability under supervision. Once you have shown stability and compliance, there will be opportunities to move to lower supervision.

Most importantly, and probably the hardest concept to grasp, is that during your term of supervision, you may have more than one PO. You will not keep the same PO all the way through your supervision, and you may have contacts with your PO in the community as well as by phone, mail or email. This is a good thing! It means you are making positive progress on supervision and are adjusting well, which is the primary goal.

### **Communication is Critical!**

It is our job to assist you in meeting your needs. It is imperative during your term of supervision that you communicate with your PO about what is happening in your life. No matter which level of supervision you are on, your PO is available to assist you with any situation that occurs in your life.

# **SECTION I**

## **NONCOMPLIANCE WITH CONDITIONS OF SUPERVISION**

The conditions of supervision clearly relate your obligations and the court's expectations regarding your compliance. The consistent enforcement of conditions by the U.S. Probation Office is necessary to execute the sentence, reduce risks, and promote effective correctional treatment. Your actions that are not consistent with the conditions of supervision constitute noncompliant behavior and are a violation of your supervision.

Violations may consist of new criminal activity or failure to meet the requirements of other conditions, commonly known as technical violations. Because violations can take many forms, may or may not require an intervention by statute, and may entail little substantial risk to the community, management of noncompliant behavior requires the use of a variety of interventions, or sanctions.

The choice of an intervention or sanction is guided by the principle of the least restrictive measure(s) necessary to achieve the goals of supervision. Interventions should be appropriate and purposeful, timely, enforceable, and progressive. Progressive means that repeated instances of noncompliance, or violations, generally should be addressed by increasingly greater consequences. Each step taken to bring about compliance should be the next least intrusive given the nature of the violation, and your current supervision status at the time the violation occurred.

The following interventions, or sanctions, may be used alone or in combination with each other.

- Reprimands and Warnings
- Administrative Staffing
- Increased Frequency of Current Supervision Activities (For example, more counseling sessions, or urinalysis tests.)
- Implementing Additional Supervision Activities
- Compliance Review Hearing
- Modification of the Conditions of Supervision
- Extension of the Term of Supervision
- Revocation

The U.S. Probation Officer in some cases, and for some violations, must file a violation report with the appropriate authority. As stated elsewhere in this handbook, revocation is sometimes mandatory for certain violations.

It is the responsibility of the court or other appropriate authority to make a final determination on the violation(s), and it is at their discretion to decide on the appropriate sanction for noncompliant behavior.

## **DIRECTIONS FOR COMPLETING THE MONTHLY SUPERVISION REPORT FORM (MSR)**

This monthly form is to be completed at the end of each month and sent to the probation office no later than the 5th day of the following month. The form must be completed thoroughly and accurately. Do not hesitate to discuss this form with your PO if you have any questions about how to complete it. If something does not apply specifically to you put N/A. **DO NOT leave any lines blank.**

### **PART A**

1. Print your first, last and middle name legibly. **USE ONLY A BLACK OR BLUE INK PEN TO COMPLETE THE REPORT.**
2. Put any other name that may have been used in court.
3. Put your full street address and apartment number. DO NOT PUT PO BOX OR MAIL DROP NUMBERS IN THIS SPACE.
4. Put your city, state and zip code clearly.
5. Print the name of your apartment/town home complex and/or community subdivision. Advise as to whether you rent or own the property.
6. This is where you may list your post office box number or any other mailing address including your email address.
7. Put ALL phone numbers including pagers, cellular phones, car phones, and message numbers, or answering services.
8. List ALL NAMES of persons living at your residence.
9. Check yes or no if you moved during the month.
10. Put the exact date of move and reason for moving. THE PROBATION OFFICER MUST BE PERSONALLY NOTIFIED OF A MOVE 10 DAYS PRIOR TO YOU MOVING--DO NOT COUNT THIS FORM AS NOTIFICATION.

### **PART B**

11. Put NAME, ADDRESS AND PHONE number of employer. If self-employed list office address, phone number and name of company.
12. Put name of immediate supervisor and phone extension.
13. Check yes or no as to employer's knowledge of your criminal status.
14. Put the number of days missed from work and the specific reason for the absence.
15. Put your exact job title.
16. List the gross income which is your total income BEFORE deductions/taxes are removed.
17. Put the exact days and hours you report to and leave from work. (Not 40 hours).

18. Check yes or no if you had a job change or were terminated during the month. YOU MUST NOTIFY THE PROBATION OFFICER AT LEAST 10 DAYS BEFORE THE CHANGE. IF NOTIFYING THE PROBATION OFFICER AT LEAST 10 DAYS IN ADVANCE IS NOT POSSIBLE DUT TO UNANTICIPATED CIRCUMSTANCES, YOU MUST NOTIFY THE PROBATION OFFICER WITHIN 72 HOURS OF BECOMING AWARE OF A CHANGE OR EXPECTED CHANGE.
19. Put exact date of termination and reason why you were terminated from the employment.

### **PART C**

20. List all vehicles OWNED OR DRIVEN by you. Put the year, make, model, color of vehicle, current mileage, license plate number and name of the owner of the vehicle. This must be completed in detail each month. This also includes company vehicles you may drive.

### **PART D**

21. This is the amount of income you bring home AFTER deductions/taxes are removed. Documentation of the amount of income you report is to be attached monthly.
22. List any additional monies or benefits you receive during the month such as food stamps, tax refunds, welfare, inheritance, loans, trust funds, and spouse's income etc.
23. Add up your net income plus the "other income" and put the amount here.
24. The total of all your necessary monthly expenses incurred goes here.
25. Check whether you have a post office box, safe deposit box and/or storage space, and provide specific location.
26. Check whether you have a checking account and list the name of the bank and your account number. List your exact balance at the end of the month. The PO may request copies of bank statements to verify this information.
27. Do the same as #26 (above) regarding your savings account.
28. Check whether your spouse, significant other or dependent has an account that you contribute toward or receive money from, and provide bank name, account number and the exact end of the month balance.
29. List all purchase of goods or services, (including gambling losses) you paid \$500 or more for during this month. Print the date, amount of expenditure, method used for payment and description of item.

### **PART E**

30. If you were questioned by law enforcement officers check yes, otherwise, check no. If yes, provide the exact date of questioning, who questioned you, name of agency and officer and the reason for the questioning. YOU MUST PERSONALLY NOTIFY YOUR PROBATION OFFICER WITHIN 72 HOURS OF THIS CONTACT. Attach copies of citations, bond papers, complaints or other documents for verification.
31. If you were arrested or named as a defendant in any other case check yes. Otherwise, check no. If yes, give the details including the date of charges and disposition or status of case.
32. If you resolved any pending charges this month check yes. Otherwise, check no. If yes, indicate the exact date of hearing, the court you attended and final disposition of the case. Attach a copy of the citation, receipt, charges and disposition.

33. Was anyone in your household arrested or questioned by law enforcement during this month? If yes state who (full name) was arrested and the reason for the arrest. Advise as to the disposition or status of the case. Otherwise, check no.
34. If you had contact with anyone who has a criminal record check yes and list their full name. Otherwise, check no.
35. If you possessed or had ANY access to a firearm check yes and explain why. Otherwise, check no.
36. If you possessed or used any illegal drugs, check yes and explain when, why and type of drug. Otherwise, check no.
37. If you traveled outside the state of Kansas, check yes and explain where you went and why. If possible, attach copy of flight information. Otherwise, check no.
38. If you have a special assessment fee, restitution, or a fine to pay, check yes and list the amount of your monthly payment. Otherwise, check no.
39. If you have community service to complete, check yes. List the number of hours you completed this month, the number of hours you missed and the balance of hours remaining.
40. Indicate whether you have a drug, alcohol or mental health aftercare condition. If so, indicate whether you missed any sessions during the month. Indicate whether you failed to respond to any phone recorder instructions and why.
41. Read the warning regarding truthful statements on this report.
42. Sign your full name and date you completed the report.
43. **Make sure you attach all required documentation to this form before mailing.**

*See sample of Monthly Supervision Report on next two pages.*



**U.S. PROBATION OFFICE**  
**MONTHLY SUPERVISION REPORT FOR THE MONTH \_\_\_\_\_, 20 \_\_\_\_\_**

Court Name: _____		DOB: _____		Current Name (if different from Court Name): _____		Probation Officer: _____	
<b>PART A: RESIDENCE (If new address, attach copy of lease/purchase agreement.)</b>							
Street Address, Apt. Number: _____		Own or Rent? <input type="checkbox"/> Yes <input type="checkbox"/> No		Home Phone: _____		Cellular Phone: _____	
City, State, Zip Code: _____		Persons Living With You: _____					
Secondary Residence: _____		Own or Rent? <input type="checkbox"/> Yes <input type="checkbox"/> No		Did you move during the month? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Mailing Address (if different): _____		E-Mail Address: _____		If yes, date moved: _____ Reason for Moving: _____			
<b>PART B: EMPLOYMENT (If unemployed, list source of support under Part D.)</b>							
Employer Company Name: _____ Address: _____ City/State/Zip: _____ Phone: _____				Full Name of Immediate Supervisor: _____		Is your employer aware of your criminal status? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				How many days of work did you miss? _____ Why? _____			
Position Held: _____		Gross Wages: \$ _____		Hours per Week: _____		Work Schedule: _____	
<input type="checkbox"/> Full-time		<input type="checkbox"/> Hourly		<input type="checkbox"/> Weekly			
<input type="checkbox"/> Part-time		<input type="checkbox"/> Bi-Weekly		<input type="checkbox"/> Monthly			
<input type="checkbox"/> Self-employed		<input type="checkbox"/> Bi-Monthly		<input type="checkbox"/> Yearly			
Did you change jobs? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Start Date _____				If changed jobs or terminated, state when and why. _____			
Were you terminated? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, End Date _____							
<b>PART C: VEHICLES (List all vehicles owned or driven by you.)</b>							
1. Year/Make/Model/Color: _____		Mileage: _____		Tag Number: _____		Owner: _____	
				Vehicle I.D.#: _____			
2. Year/Make/Model/Color: _____		Mileage: _____		Tag Number: _____		Owner: _____	
				Vehicle I.D.#: _____			
<b>PART D: MONTHLY FINANCIAL STATEMENT</b>							
Net Earnings from Employment: _____ (Attach Proof of Earnings)				Do you rent or have access to: a post office box? <input type="checkbox"/> Yes <input type="checkbox"/> No a safe deposit box? <input type="checkbox"/> Yes <input type="checkbox"/> No a storage space? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Other Cash Inflows: _____				Name and Address of Location: _____ Box No. or Space _____			
TOTAL MONTHLY CASH INFLOWS: _____				_____			
TOTAL MONTHLY CASH OUTFLOW: _____				_____			
Do you have a checking account(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No Bank Name: _____ Account No.: _____ Balance _____				Does your spouse, significant other, or dependant have a checking or savings account that you enjoy the benefits of or make occasional contributions toward? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have a savings account(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No Bank Name: _____ Account No.: _____ Balance _____				Bank Name: _____			
Attach a complete listing of all other financial account information, if you have multiple accounts.				Account No.: _____ Balance: _____			
List all expenditures over \$500 (including, e.g., goods, services, or gambling losses)							
<u>Date</u>		<u>Amount</u>		<u>Method of Payment</u>		<u>Description of Item</u>	
_____		_____		_____		_____	
_____		_____		_____		_____	
_____		_____		_____		_____	

<b>PART E: COMPLIANCE WITH CONDITIONS OF SUPERVISION DURING THE PAST MONTH</b>	
<p><b>Were you questioned by any law enforcement officers?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, date: _____</p> <p>Agency: _____</p> <p>Reason: _____</p>	<p><b>Were you arrested or named as a defendant in any criminal case?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, when and where? _____</p> <p>Charges: _____</p> <p>Disposition: _____</p>
<b>(Attach copy of citation, receipt, charges, disposition, etc.)</b>	
<p><b>Were any pending charges disposed of during the month?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, date: _____</p> <p>Court: _____</p> <p>Disposition: _____</p>	<p><b>Was anyone in your household arrested or questioned by law enforcement?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, whom? _____</p> <p>Reason: _____</p> <p>Disposition: _____</p>
<p><b>Did you have any contact with anyone having a criminal record?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, whom? _____</p>	<p><b>Did you possess or have access to a firearm?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, why? _____</p>
<p><b>Did you possess or use any illegal drugs?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, type of _____</p>	<p><b>Did you travel outside the district without permission?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, when and where? _____</p>
<p><b>Do you have a special assessment, restitution, or fine?</b>    <input type="checkbox"/> Yes    <input type="checkbox"/> No      If yes, amount paid during the month:</p> <p>Special Assessment: _____      Restitution: _____      Fine: _____</p>	
<b>NOTE: ALL PAYMENTS TO BE MADE BY MONEY ORDER (POSTAL OR BANK) OR CASHIER'S CHECK ONLY.</b>	
<p><b>Do you have community service work to perform?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Number of hours completed this month: _____</p> <p>Number of hours missed: _____</p> <p>Balance of hours remaining: _____</p>	<p><b>Do you have drug, alcohol, or mental health aftercare?</b>  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, did you miss any sessions during this month?  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Did you fail to respond to phone recorder instructions?  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, why? _____</p>
<p><b>WARNING: ANY FALSE STATEMENTS MAY RESULT IN REVOCATION OF PROBATION, SUPERVISED RELEASE, OR PAROLE, IN ADDITION TO 5 YEARS IMPRISONMENT, A \$250,000 FINE, OR BOTH.</b></p> <p style="text-align: center;">(18 U.S.C. § 1001)</p>	<p>I CERTIFY THAT ALL INFORMATION FURNISHED IS COMPLETE AND CORRECT.</p> <p>_____ SIGNATURE                                  DATE</p>
<p>REMARKS:</p>     <p>_____ Date</p> <p>U.S. Probation Officer</p>	<p>RECEIVED:</p> <p>_____ Mail                  _____ OC</p> <p>_____ HC                  _____ CC</p> <p><b>Return to:</b></p>

# UNITED STATES PROBATION AND PRETRIAL SERVICES OFFICE DISTRICT OF KANSAS



## INSTRUCTIONS FOR TRAVEL REQUESTS

The District of Kansas prohibits travel out of the State of Kansas during the initial 60 days of supervision. Exceptions to this rule will be made only on a case-by-case basis, with regard to emergency and business related travel. After the initial 60 day period, all travel outside the district requires authorization from the U.S. Probation Office, regardless of whether it is a business or pleasure trip. Please keep in mind that travel is a privilege and is contingent on full compliance with your conditions. In general, travel for recreational purposes will be restricted when:

- a person is noncompliant with the court-ordered payment plan; or
- a person will incur out-of-pocket expenses associated with the proposed travel.

Funds for recreational travel should ordinarily be applied to court-ordered obligations in lieu of travel.

When requesting travel, it is necessary that you submit a written travel itinerary at least fourteen (14) days prior to the departure date for domestic travel; or at least sixty (60) days prior to the departure date for international travel. International travel requires Court approval. The attached Request For Permission to Travel forms are to be used and must include the following:

- a) Departure and return dates.
- b) Purpose of trip.
- c) Means of travel: flight or bus information; or make, color, and license plate of automobile.
- d) Name(s) and relationship of traveling companion(s).
- e) Where you will be staying: name of relative, friend, hotel, address, and telephone number. If you will be staying at different locations on different nights, it is necessary that you provide specific information with regard to each location.

Once the request has been submitted and the travel approved, a permit may be issued either by mail, or you may be required to pick it up at the U.S. Probation Office. If issued, it is important that you keep the travel permit with you at all times during your travel. Other districts have specific requirements when individuals under supervision travel into their district. Therefore, there may be occasions when you are expected to report in person to the U.S. Probation Office in the district to which you are traveling. **Upon your return please submit verification of your travel (Example: Hotel, Gasoline Receipt).**

**UNITED STATES PROBATION AND PRETRIAL SERVICES OFFICE  
DISTRICT OF KANSAS**

**REQUEST FOR PERMISSION TO TRAVEL**

**(TO BE SENT AT LEAST 14 DAYS IN ADVANCE FOR DOMESTIC  
TRAVEL OR 60 DAYS FOR INTERNATIONAL TRAVEL)**

**DATE OF REQUEST:** \_\_\_\_\_ **OFFICER:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**I WILL BE TRAVELING TO:** \_\_\_\_\_

DATE LEAVING: \_\_\_\_\_

DATE RETURNING: \_\_\_\_\_

PURPOSE OF

TRIP: \_\_\_\_\_

I WILL BE TRAVELING

WITH: \_\_\_\_\_

**I WILL BE TRAVELING VIA: (car, truck, commercial airline, etc.)**

YEAR, MODEL, AND COLOR OF VEHICLE: \_\_\_\_\_

LICENSE PLATE NUMBER: \_\_\_\_\_

NAME OF AIRLINE: \_\_\_\_\_

FLIGHT INFORMATION: \_\_\_\_\_

**I WILL BE STAYING AT:**

NAME/ADDRESS/PHONE NUMBER OF PERSON(S): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOTEL ACCOMMODATIONS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Submit requests to your assigned location:**

<i>U.S. Probation Office 500 State Avenue, M35 Kansas City, Kansas 66101 Fax: 913-735-2401</i>	<i>U.S. Probation Office 444 SE Quincy, Room 375 Topeka, Kansas 66683 Fax: 785-338-5601</i>	<i>U.S. Probation Office 401 North Market, 3rd floor Wichita, Kansas 67202 Fax: 316-315-4401</i>
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**FOR PROBATION OFFICE USE ONLY**

☐ Approved      Officer Signature \_\_\_\_\_

☐ Denied      Date \_\_\_\_\_

## SECTION II

### ORDERS OF FINES, RESTITUTION, AND ASSESSMENTS

The court may have ordered a fine, restitution, and/or assessment as a part of your sentence. The PO will work with you to address these financial obligations. Your Judgment will set out your schedule of payments as ordered by the Court; however, you may also be required to sign a payment agreement identifying the terms by which you will meet your court ordered financial obligations.

#### **How to Pay Financial Penalties:**

Criminal debt payments may be made online at <https://www.pay.gov> using a bank account, debit, credit or prepaid card. Search for "KSD" on pay.gov and complete the KSD Criminal Debt Form to make a payment. For more information and instructions, see <http://ksd.uscourts.gov/criminal-debt>.

Alternatively, payments toward court ordered costs may be made by certified check or money order (**no personal checks submitted**) and should be forwarded to the following address:

**CLERK, U.S. DISTRICT COURT  
401 NORTH MARKET, ROOM 204  
WICHITA, KANSAS 66202**

The terms of the payment agreement will identify the amount of payment, and the date payment is due each month.

Here are some frequently asked questions about fines, restitution, and assessments that may help you answer some of the questions you have about this issue.

#### **1. How do I know what payments I owe and when they are due?**

The Judgment and Commitment Order indicates which financial penalties have been imposed by the court and when payment is due. The court can order your financial penalties paid in one of four ways:

- **Immediately:** This means you have **ten days** from the date of your sentence to pay the financial penalty.
- **Date Certain:** This means the court has ordered you to pay your financial penalty by a specific date.
- **Court set installments:** This means the court has ordered you to pay your financial penalty in equal installments that cannot be changed unless the court orders the installment plan changed.
- **Probation set installments:** This means your PO, with court approval, will set the installments for you to pay your financial penalty. This plan can be changed by the PO with court approval.

**2. The Court has ordered me to pay a special assessment, fine and restitution. How do I know which one I should pay first?**

The law and court policies have already established how your payments will be applied. Your special assessment will be paid first followed by restitution, restitution interest (if applicable), fine principal, court costs, fine interest, and penalties.

**3. Will I be charged interest?**

Yes, unless the court waives the interest at the time of your sentencing. Interest may accrue on an outstanding fine and restitution if you have a balance of more than \$2,500, unless the fine is paid in full before the fifteenth day after the date of the judgment.

**4. What if I am late paying my financial penalties?**

Your payment is considered late if a payment is past due for more than 30 days. If your payments are delinquent, you could be charged a penalty and could be ordered to appear for a violation hearing which could lead to punitive sanctions.

**5. How are fine/restitution payments submitted?**

Payments should be mailed directly to the Clerk of the U.S. District Court in Wichita, Kansas, at the address previously provided or you may hand deliver payments directly to the Clerk's Office in Wichita, Topeka and Kansas City, Kansas. You may also make debit/credit card payments over the telephone to the Clerk's offices as noted on page 22.

**6. What should I know about making payments?**

- Make your check or money order payable to the **Clerk, United States District Court.**
- Keep proof of your payment for your records. (A money order stub is not proof of payment.)
- Include on your money order your assigned docket number of your case.

**7. If I'm revoked, will I still have to pay my financial penalties while in prison?**

Perhaps, that depends on the court Order. If the Judgment and Commitment Order indicates that you must pay by a **date certain**, then you are not required to pay until the specific date. If the Judgment and Commitment Order indicates that you must pay **immediately or in installments**, payments can be made while you are incarcerated. The Bureau of Prisons will encourage you to participate in the Inmate Financial Responsibility Program. Under this program, you and your case manager develop a financial plan designed to allow you to pay your obligations while incarcerated.

## **Treasury Offset Program (TOP):**

Federal law allows agencies to refer debts to the United States Department of the Treasury for collecting debts through the Treasury Offset Program. Under this program, the Department of the Treasury will reduce or withhold any of your eligible Federal payments (see list of federal payments eligible for offset below) by the amount of your debt. This “offset” process is authorized by the Debt Collection Act of 1982, as amended by the Debt Collection Improvement Act of 1996, and the Internal Revenue Code.

The U.S. Department of Justice will notify the debtor or attorney of record with a Notice of Intent to Offset.

All federal clients who have an outstanding monetary obligation to the Court will be placed in the Treasury Offset Program.

Payments eligible for offset include:

- Federal income tax refunds
- Federal salary, including the military
- Federal retirement, including military retirement
- Certain federal benefit payments, such as Social Security, Railroad Retirement (other than Tier 2), and Black Lung (Part B) benefits (which regulations are published); and o Other federal payments, including certain loans to you that are not exempt from offset.
- Payments made by States

If you are a federal employee, member of the Armed Forces including civilian employees, you may be entitled to a hearing to dispute the amount of the payroll deduction. Active duty service members may have limited protections under the Servicemembers Civil Relief Act of 2003.

If you are married, your spouse may be eligible to receive a portion of a joint refund. Certain restrictions apply. Taxpayers filing joint returns should obtain Form 8379, Injured Spouse Claim and Allocation, before filing a return. The instructions will explain the steps your spouse may take to obtain his/her share of your joint income tax refund.

If you have filed for bankruptcy, you may not be subject to offset while the automatic stay remains in effect. However, you should notify the United States Attorney’s Financial Litigation Unit of your bankruptcy.

**If you have questions regarding the payment of your financial penalties, contact your probation officer. For inquiries regarding the Treasury Offset Program, call:**

**U.S. Department of Justice (Financial Litigation Unit) at 785-295-2850.**

## **SECTION III**

### **SUBSTANCE ABUSE, MENTAL HEALTH & SEX OFFENDER TREATMENT**

Persons under supervision with a special condition requiring substance abuse, mental health or sex offender treatment will likely be referred to a treatment program with an agency under contract with the U.S. Probation Office to provide the desired services.

Treatment services include, but are not limited to, medical, educational, social and psychological services as well as other rehabilitative and preventive efforts. The goals of treatment are to protect the public and benefit offenders by eliminating their dependence on drugs or alcohol and addressing relevant mental health issues.

Your U.S. Probation Officer will provide you the name, address, and phone number of the contract agency, and direct you to initiate contact with that agency usually within the first 72 hours of supervision.

Although extensive psychological testing and evaluations can be completed, in most cases an intake assessment will be the first step. This is at least one comprehensive diagnostic interview by a counselor/therapist at the contract agency. From this intake, any recommendations for additional treatment will be made, and plans for carrying out those recommendations will be made.

If outpatient counseling is recommended, it may be on an individual, group, or family basis, or a combination thereof. You will work with the counselor to identify treatment goals and develop a treatment plan.

In most cases where there is a substance abuse treatment condition there will also be a requirement to submit to random drug testing. This will most generally be accomplished by participating in the code-a-phone program. Drug testing is an adjunct to the treatment process that assists the officer in determining whether there is any ongoing substance use. The frequency of drug tests is also done on a Phase Level System. Both counseling and drug testing phase level requirements decrease with time and satisfactory performance.

Copayments for treatment services are mandatory in the District of Kansas. Your PO will assess your individual financial ability and determine the amount of copay you are assessed. Failure to pay your ordered copayment is considered a violation. Lack of payment could keep you from approved out-of-district travel, unable to move down to a lower supervision level or impeded your chances of receiving early termination.

The U.S. Probation Office contracts with substance abuse, mental health and sex offender treatment agencies across the State of Kansas. Please consult with your PO to receive specific information on your service provider.



## **MANDATORY REVOCATION RESULTING FROM DRUG USE**

If you test positive for illegal controlled substances more than three times over the course of one year, then revocation is mandatory. The court can consider whether the availability of appropriate substance abuse treatment programs, or your current or past participation in such programs warrants an exception.

## **SECTION IV**

### **HOME CONFINEMENT AND ELECTRONIC MONITORING**

In an environment of limited resources and an escalating prison population, it has become common practice to utilize other measures to supervise offenders in the community. Home confinement is a generic term that refers to any judicially or administratively imposed condition of supervision requiring a participant to remain in his or her residence for any portion of the day. Home confinement may be monitored with the assistance of electronic equipment, or without it. The primary objectives of home confinement are similar to that of supervision in general. That is to enforce compliance with the conditions of release, minimize risk to the public, and to re-integrate the offender into a law-abiding lifestyle by utilizing correctional treatment services where needed.

If you have a condition requiring home confinement with electronic monitoring your supervising U.S. Probation Officer will go over the specific requirements of the program with you. There will be certain restrictions on your telephone service: no call waiting or forwarding; no answering machines. With this, you will be required to wear an ankle bracelet.

A schedule might be established that will allow you to continue to work and allow brief periods of time to take care of personal business, like grocery shopping and other appointments. You and your PO will set the schedule. A copy will be provided to you.

You may be required to pay the costs of your electronic monitoring. Payment for electronic monitoring must be made in the form of a money order or cashier's check made payable to the contracting monitoring company and paid directly to them. You must attach a copy of the payments to your Monthly Supervision Report forms submitted to your PO.

## **SECTION V**

### **ADDRESS NOTIFICATION AND REGISTRATION REQUIREMENTS**

#### **CRIMES OF VIOLENCE OR DRUG OFFENSES**

The Violent Crime Control and Law Enforcement Act of 1994 requires the U.S. Probation Office to notify the Chief State Law Enforcement Officer (Kansas Bureau of Investigation) and the local Police Department of a certain probationer's or supervised releasee's address or change of address. This covers those individuals convicted of crimes of violence or drug offenses.

## **SEX OFFENSES**

The State of Kansas has passed an Offender Registration Act that requires those individuals convicted after a certain date of a sex offense, to register with the local Sheriff's Department in the county in which you reside, work and attend school. This must be done within three (3) days of arrival and within three (3) days of any later move to a new address within that county.

Although this is a state law, a federal conviction of any sex offense carries with it this registration requirement. Specific questions regarding this registration requirement should be directed to your supervising U.S. Probation Officer.

## **DNA COLLECTION REQUIREMENTS**

Congress passed Public Law No. 106-546, Section 3, 114 Stat.2726 (December 19, 2000), which amends 18 U.S.C. §3563(a), 18 U.S.C. §3583(d), and 18 U.S.C. §4209 to include a mandatory condition of supervision for persons convicted of federal felony offenses to cooperate in the collection of a DNA sample. Specific questions regarding this requirement should be directed to your supervising U.S. Probation Officer.

## **SECTION VI**

### **CIVIL DISABILITIES**

Under the laws of many states, and under federal law, conviction of a felony has consequences that linger long after a sentence has been served. Convicted felons may lose essential rights of citizenship, such as the right to vote and hold public office and may be restricted in their ability to practice a profession and earn a livelihood. In almost all states, and under the federal gun control laws, conviction of a felony results in loss or restriction of the right to possess or carry firearms. These and other "collateral" consequences of a felony conviction are burdens that follow the commission of a crime, in addition to any penalty imposed by the courts. Most jurisdictions provide for eventual relief, either automatically with the passage of time, or through some affirmative executive or judicial act based on evidence of rehabilitation.

### **POSSESSION OF FIREARMS AND OTHER DESTRUCTIVE DEVICES**

United States Code, Title 18, Section 922(g) provides that it is unlawful for anyone who has been convicted of a felony, a crime punishable by a term of imprisonment exceeding 1 year, to possess a firearm or ammunition. The term "firearm" is statutorily defined to include any weapon, including a starter gun which will, or is designed to, or may be converted to, expel a projectile by the action of explosion; the frame or receiver of any such weapon; any firearm muffler or silencer; or any destructive device. Violation of this provision is punishable by up to 10 years imprisonment and/or fine of up to \$250,000. In addition, possession of a firearm is a violation of probation, supervised release and parole pursuant to 18 U.S.C. §§ 3563(a)(1) and 3583(d), and U.S. Parole Commission Rules (28) C.F.R. §2.40 (a)(11). For offenses occurring on or after December 31, 1988, revocation

of probation is mandatory pursuant to 18 U.S.C. § 3565(b). Revocation of supervised release is also mandatory under 18 U.S.C § 3583 (g)(2).

Therefore, if you have been convicted of a felony, you are not to possess a firearm, or any other destructive devices as previously described in this section. If you have been convicted of a misdemeanor offense and the Court has imposed a condition prohibiting possession of a firearm or other destructive devices, possession of such would be in violation of your supervision conditions.

Prohibition of possession of a firearm or other destructive devices by a felon is not limited to the period of time you are under supervision, but is for a **LIFETIME**, unless you receive approval from the proper authorities. After you have been discharged from supervision, the Federal Gun Control Act of 1968 prohibits you from owning or possessing a firearm. Currently, with respect to a federal felony conviction, the only way to receive relief is to get a Presidential pardon.

## **PRESIDENTIAL PARDON**

To determine whether you are eligible to apply for a presidential pardon, contact the pardon attorney at the following address:

**The Office of Pardon Attorney  
U.S. Department of Justice 145 N Street N.E.  
Suite 5E  
Washington, D.C. 20530**

Include in your letter the date and place of your conviction, the nature of the offense, the sentence you received, when released from prison and/or when released from supervision. A pardon does not erase or expunge the record of conviction. It is an indication of forgiveness and should lessen the stigma of conviction. It may be helpful with obtaining a license, bonding or employment.

Many states have laws that govern the possession of firearms by convicted felons. Those provisions are separate from federal requirements. Kansas law prohibits possession of all firearms for certain violent and drug offenders following a state conviction. There is automatic restoration 10 years after completion of the sentence for violent and drug offenders, 5 years for others. Your federal felony conviction prohibition is for a lifetime, regardless of the state law. This can become a complicated issue, and we recommend that you never possess a firearm unless you are completely sure your right to possess a firearm has been restored.

## **RIGHT TO VOTE**

The United States Constitution does not set qualifications for voting; however, it does recognize the states' authority to determine the qualifications for voting, even in federal elections. Therefore, the effect of a federal felony conviction upon the right to vote is determined by the law of the state in which the felon seeks to vote and thus varies from state to state.

In Kansas, you are disqualified from voting due to death, federal or state felony convictions, or declaration by a Kansas court of law.

Conviction of either a state or a federal felony results in the loss of voting rights until you complete the terms of the sentence. If you are granted probation or parole, your term of sentence is not completed until the probation or parole is finished. The law prohibits a person who has been convicted of a felony from all the following: registering to vote, voting, holding public office, or serving on a jury.

1. Federal convictions: The National Voter Registration Act directs the U.S. Attorney in each federal judicial district to notify the Secretary of State's office of federal felony convictions. The Secretary of State's office forwards the notice to the appropriate county election officer for cancellation of the felon's voter registration.
2. State convictions: the county election officer is required to cancel the voter registration of all persons convicted of state felonies.

**Note:** A felon who loses voting rights may re-register to vote after their sentence is completed. The county election officer does not automatically restore the person's name to the registration list. When registering to vote, the felon is not required to submit proof of final discharge. The voter registration application form contains an affidavit above the signature line attesting that the person's rights have been restored. Signing a false affidavit is a felony, which could result in loss of voting rights upon conviction.

## **RIGHT TO SERVE ON A FEDERAL JURY**

Conviction in federal or state court of a felony disqualifies an individual from serving on a federal grand or petit jury unless "his civil rights have been restored." 28 U.S.C. § 1865. Inasmuch as federal law provides no procedure for restoring civil rights, presumably § 1865 refers to restoration of civil rights under state law. A presidential pardon restores right to serve on a jury. Additionally, once a person has completed their sentence, they would be considered eligible to serve on a jury as any other qualified candidate.

## **FEDERAL BENEFITS**

Certain federal benefits may be revoked or modified upon conviction of a crime. Drug offenders convicted after September 1, 1989, may have restrictions placed upon their receipt of grants, licenses, contracts, and other federal benefits, excluding retirement, welfare, Social Security, health, disability, public housing, and benefits based on military service. 21 U.S.C. § 862. At the time of sentencing the Court would impose, if any, period of ineligibility of these benefits.

## **SELECTIVE SERVICE REGISTRATION**

If you are a man ages 18 through 25 and living in the U.S., then you must register with Selective Service. It's the law. You can register at any U.S. Post Office and do not need a Social Security Number. **When you do obtain a social security number, let Selective Service know.** Provide a copy of your new social security number card; being sure to include your complete name, date of

birth, Selective Service registration number, and current mailing address; and mail to the Selective Service System, P.O. Box 94636, Palatine, IL 60094-4636.

Be sure to register before your 26th birthday. After that, it's too late! Failure to register with Selective Service will prevent you from receiving financial assistance and grants for skills training and educational programs.

## **OTHER MISCELLANEOUS RIGHTS AND ISSUES**

A felony conviction may also affect your right to hold certain federal offices or federal jobs. However, as a general matter, a felony conviction does not disqualify a person from federal employment, but is a factor in determining suitability for it, according to the Office of Personnel Management.

A conviction may also result in the loss of a federal license, for example, a customs broker's license or a locomotive engineer's license. A person who has been convicted of any criminal offense involving dishonesty or breach of trust may not become, or continue as, an institution-affiliated party with respect to a federally insured depository institution; own or control such an institution; or otherwise participate in the conduct of the affairs of such an institution. 12 U.S.C. § 1829.

Conviction of certain offenses may disqualify an individual from serving in several capacities relating to labor organizations and employee benefit plans. 29 U.S.C. § 504, 1111. This disability may last up to 13 years after conviction.

An individual convicted of a felony is ineligible for enlistment in any service of the armed forces.

A felony conviction in federal court may also impact certain rights you have under state laws. This may include real estate licenses, registrations for nurses or doctors, or other related health professions. A conviction may not automatically prevent you from getting those types of jobs; however, it may require that you take additional steps which are not necessary for those without a felony conviction.

**The U.S. Probation Office Has More Information Regarding Civil Disabilities Of Convicted Felons. If You Have Any Questions, Ask Your Supervising U.S. Probation Officer.**