



SUPERIOR COURT OF CALIFORNIA
COUNTY OF STANISLAUS
 800 11TH STREET
 MODESTO, CALIFORNIA 95354



IMMEDIATELY REPORT TO WINDOW A - LOCATED IN THE 1ST FLOOR LOBBY

PARTICIPANT NAME:		VIOLATION DATE:	TODAY'S DATE:
ADDRESS:		COURT CASE NUMBER:	
		DRIVER'S LICENSE NUMBER:	
		BLOOD ALCOHOL CONTENT (BAC):	
DATE OF BIRTH:		PHONE NUMBER:	
EMAIL ADDRESS:		<input type="checkbox"/> Wet & Reckless <input type="checkbox"/> 3-Month First Offender <input type="checkbox"/> 6-Month First Offender <input type="checkbox"/> 9-Month First Offender <input type="checkbox"/> 18-Month Second Offender <input type="checkbox"/> 30-month Third Offender	

You are ordered by the Superior Court of California to enroll in a DUI program. Please contact the DUI provider directly if you need to reschedule your appointment or have any questions regarding your program obligations. Your Intake appointment has been scheduled for:

PROVIDER NAME:	LOCATION:	DATE/TIME:

Safety Center Incorporated

Wet Reckless, First Offender, & Enhanced DUI
 Modesto - (209) 526-9393
 2005 Evergreen Avenue, Ste #350

Occupational Health Services

Wet & Reckless, Enhanced, & Multiple Offender DUI
 Modesto & Turlock - (209) 527-8070
 2260 Floyd Avenue, Ste #100
 Note: Turlock enrollment is done at the Modesto office

YOU MUST BRING THIS NOTICE WITH YOU TO YOUR INTAKE APPOINTMENT. IF YOU FAIL TO APPEAR FOR YOUR SCHEDULED APPOINTMENT AND FAIL TO IMMEDIATELY RESCHEDULE, YOU WILL BE RETURNED TO COURT AND A WARRANT MAY BE ISSUED FOR YOUR ARREST.

Defendant's Signature: _____ Date: _____

Program Representative: _____ Date: _____

Distribution: White (DUI Provider) Yellow (Defendant) Pink (County)