DOMESTIC VIOLENCE BATTERERS' PROGRAM **** This is the LA 1 Format Report ****

PROGRESS REPORT

Case Nbr 384509384059

Courts Long Beach Municipal Court

To: **Long Beach Municipal Court** 774 Long Beach Blvd Long Beach, CA 88888

From:

Austin Drug & Alcohol Abuse Program, Inc. 77 North Pacific Coast Hwy Suite 211 Aliso Laguna, CA 92699 Phn: (949) 568-8999 Fax: (949) 568-8888

mikeroberts @ genesissvc.com

DEFENDANT INFORMATION

Client

Eugene Timothy Baker 453 Rosemead Blvd Long Beach, CA 99099

Date of Birth: 04/12/1977 Telephone: (555) 232-5555

Drivers Lic or SSN: SSN: 221-45-6788

Concurrent Counseling Needs or AA/NA Treatment: Yes

AA Program of Long Beach

Current Status: Enrolled

Fees

Enrollment Fee: \$0.00 Cost per Session: \$25.00 Program Cost: \$1,240.00 Balance Past Due: -\$50.00 Balance Owing: \$850.00 Payments Current: No

Days Since Last Report: 0

Sessions

Start Time: 05:30 pm Length Hrs:Mins 2:00 Session Day: Monday Group/Class #: 1

Progress Note Date: 08/23/2002

Facilitator ... Jon Beckman

Session Requirements and Attendance

Date Enrolled: 11/06/2000

Sessions Ordered: 52

Sessions Attended: 20

Dates Dismissed: Dates Re-Enrolled: Sessions Missed: 2

Est Completion Date: 04/04/2003

Narrative Comments

This section contains the Comments that are accessable for editing from several forms in Beacon. These comments flow to the Progress Report and become the narrative statements for the Progress Report.

Evaluation Summary: This section contains the Evaluation Summary that my be completed via Template

Dates Missed: 01/15/01, 04/16/01

I DECLARE THAT THE INFORMATION CONTAINED IN THIS REPORT IS TRUE AND CORRECT BASED UPON THE REQUIREMENTS OF THIS PROGRAM AND THE CALIFORNIA STATE STANDARDS FOR BATTERERS PROGRAMS.

Signature: _ Date Signed: 23 Aug 2002

Authorized Representative

Printed Name: Dr Michael Roberts

Title: Director Prepared by Guided Beacon TM