

INTERSTATE COMPACT FOR JUVENILES CASE CLOSURE NOTIFICATION

FORM X

Submission Date:		Supervisio	Supervision Status:			
	(Submission Date)		_	(Parole/Probation	on)	
Sending State:		Receiving State:				
	(Sending State)			(Receiving State	te)	
Name of Juv	/enile:			DOB:		
Person Subr	mitting Case Closure Notification:					
Case Closur	re Notification Submitted By: Send	ing State	Receiv	ring State		
Please close	e the above referenced case due to:					
	Adult sentence longer than juvenile sentence					
	Case has expired Early discharge/termination from supervision granted by Sending State					
	Request by Receiving State for early discharge/termination from supervision granted					
	Relocation did not occur within 90 calendar days Unable to locate juvenile Juvenile has escaped/absconded Warrant issued for juvenile who has absconded from supervision in the Receiving State Juvenile has moved to another state Juvenile has returned to the Sending State Juvenile admitted to a residential facility for a planned stay in excess of 90 calendar days Sole purpose of supervision is collecting restitution and/or court fines					
Other or additional information:						

Denied Sending State's Reason for Denying Closure: