	UNITED STATES DISTRICT COURT MIDDLE DISTRICT OF GEORGIA	
ELLEN S. MOORE CHIEF U.S. PROBATION OFFICER 433 WALNUT STREET MACON, GEORGIA 31201	PROBATION OFFICE	<u>REPLY TO:</u> P.O. BOX 1736 MACON, GEORGIA 31202-1736 PHONE: (478) 752-8106 FAX: (478) 752-8165
то:	DATE:	
CASE		

The purpose of this letter is to provide you with written notification of conduct that requires mandatory revocation of probation (18 U.S.C. § 3565 (b)) or supervised release (18 U.S.C. § 3583 (g)) for persons convicted of a misdemeanor offense. These relevant statutes require **mandatory revocation** for any defendant who:

1) Possesses a controlled substance in violation of the conditions of supervision. or,

2) Possesses a firearm in violation of Federal law or otherwise violates a condition of supervision prohibiting the defendant from possessing a firearm.

3) Refuses to comply with drug testing imposed as a condition of your supervision. or,

4) As a part of drug testing, tests positive for illegal controlled substances more than three times over the course of one year of supervision (not calendar year). However, the Court is not required to wait for a fourth positive drug test before revoking or modifying the conditions of supervision.

It is not the goal of this office that your supervision be revoked. Our office will assist you in any way possible to help you succeed during the course of and well beyond the period of your supervision. Your performance and your cooperation dictate your continued success.

ACKNOWLEDGMENT

I hereby acknowledge that I have read or have had read to me the above information regarding Possession of a Firearm and Mandatory Revocation requirements. I further acknowledge that I have been provided with a copy of this document.

Defendant

Date

U.S. Probation Officer

Date