

Walk-through Report

Date:	Time:		
County:	Circuit:		
Compliance Specialist: Russ Duncan			
Location:			
Software:			
Collection Software: Yes <input type="checkbox"/> No <input type="checkbox"/>		IU Yes <input type="checkbox"/> No <input type="checkbox"/>	
Contact: _____		Title: _____	
Phone #: _____		Email: _____	
Contact: _____		Title: _____	
Phone #: _____		Email: _____	

Component Review

Component		Comments
1. Staff assigned to collections Program FTEs and Dollars	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2. Application / Contact Info	Yes <input type="checkbox"/> No <input type="checkbox"/>	Example
3. Verification of App/Contact (Phone # & or Address How)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4. Interview	Yes <input type="checkbox"/> No <input type="checkbox"/>	
5. Payment Terms What length of much time Example: Credit Cars /Web site:	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
6. Pay Plan Compliance Monitor	Yes <input type="checkbox"/> No <input type="checkbox"/>	How
7. Phone Call Notices/Calls Prior Notices/Call after	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
8. Mail Contact	Yes <input type="checkbox"/> No <input type="checkbox"/>	Example
9. Capias Pro Fine or warrant Issued / Notice	Yes <input type="checkbox"/> No <input type="checkbox"/>	
10. Reporting	Yes <input type="checkbox"/> No <input type="checkbox"/>	
11. Probation who collects Work Together:	State County Clerk Yes <input type="checkbox"/> No <input type="checkbox"/>	
12. (a) Judges Sets time to Pay Support payment Plan:	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
12. (b) Collections Court How well it work?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
13. Contact in court room or?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
14. Follow up	Yes <input type="checkbox"/> No <input type="checkbox"/>	
15: How would they like to Improve the system?		

Walk-through Report

Payment Plan Traffic Yes No
Time Ext. Traffic Yes No
Notices/Calls Traffic Yes No
Notice DHSMV (D6) Yes No When?
In all CF ___ MM ___ CT ___ TR ___

Other Actions:

Charge Late Fees Yes No
Traffic Late Fees Yes No
What are they & How much \$
Use of Civil Judgment Yes No
CF ___ MM ___ CT ___ TR ___

Do they work: Yes No

Collection Agent Yes No

Name;

Reinstate Driver License Yes No Cost \$ _____ When: _____
Judicial support Yes No All Courts? _____

Special Processes & activities
Yes No

They are: _____

They Want to change: _____

OTHER: _____

Summary of Findings

Recommendations