

ORDER AND CONDITIONS OF RELEASE - OWN RECOGNIZANCE PER SCHEDULE

(Use form CR-765 for release per judge order.)

Plaintiff: State of Alaska _____

vs.

Defendant: _____

DOB: _____ DL/ID: _____ State: _____ CDL

APSIN: _____ ATN: _____ Case No: _____

Offenses Charged: _____

Order and Conditions of Release

To Defendant: IT IS ORDERED that you are released on your own recognizance pursuant to the *Presiding Judge Administrative Order Establishing a Statewide Bail Schedule*. Your release is subject to the conditions below which are effective immediately. If you are arrested for violating the conditions of release, then this order is revoked and you shall be held without bail until a new bail order is set.

1. You must appear in court when ordered.
2. You must obey all court orders, and all federal, state, and local laws.
3. If represented by an attorney, you must maintain contact with your attorney.
4. If represented by an attorney, you must notify your attorney, who shall notify the prosecuting authority and the court, within 24 hours after you change residence.
5. If not represented by an attorney, you must notify the prosecuting authority and the court within 24 hours after you change residence.
6. You must not leave Alaska.
7. You must not contact any alleged victim directly or indirectly.
8. If this box is checked, you must not consume or possess alcohol.

Next Court Appearance

You must appear in court for the hearing below and at all other times ordered by the court:

Date: _____ Time: _____

Location: _____

Defendant's Agreement and Contact Information

I promise to obey all the conditions of release above. If I fail to do so, I may have my release revoked, I may be subject to arrest, and I may be subject to more criminal charges for violating my release conditions. I promise to keep the court notified of my current address.

Date Signature of Defendant

Defendant's Mailing Address: _____

Physical Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employer _____ Email _____

Officer's Acknowledgement

If you suspect that the defendant was under the influence of alcohol at time of arrest, check box #8 above.

Booking Number _____ Defendant fingerprinted

I certify that I delivered this *Release* to the defendant named above on (date) _____.

Date Time Peace Officer or DOC Officer Signature

Arresting Agency/Correctional Facility Print Name

Distribution: (1) original to court (2) copy to defendant (3) copy for jail