

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

CASH DEPOSIT BAIL BOND, CRIMINAL OR QUASI-CRIMINAL (10% OF BAIL, \$2500 MINIMUM DEPOSIT)

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ORIGIN OF BOND: Bail set by Rule of the Illinois Supreme Court OR By _____ (PRINT NAME OF JUDGE) (JUDGE'S NO.) (OFFICE CLERK)

RAIL AMOUNT: \$ _____ 00 100
 DEPOSIT AMOUNT: \$ 2500 00 100



DEFENDANT (Person Preparing Bond) - Always complete this section:
 FULL NAME: _____
 ADDRESS: _____
 CITY AND STATE: _____

STATEMENT OF DEFENDANT: I understand and accept the terms and conditions set forth below and on the reverse side of this bail bond. I understand in all cases, 10% of any amount posted as bail is retained by the Clerk of Court, by law. Further, I hereby certify that I understand the consequences of failure to appear for trial as required.

ASSIGNMENT OF BAIL BOND BY THE DEFENDANT: I hereby authorize the return of the monies posted above to the person shown on this bond as having provided money for my use after all conditions of this bail bond have been met, or as ordered by the Court.

Defendant's Signature: _____

COURT COMPLAINT OR INDICTMENT NUMBER(S)	CHARGE	DISPOSITION

DISPOSITION entered by (Signature of Deputy Clerk) _____ Hr. or Subj. CT _____ Court Date _____

COURT APPEARANCE: (Defendant appear where shall appear) in the Circuit Court of Cook County, Illinois located at:
 Address (Number and Street) _____ City/Town/Village _____
 Precinct No. _____ to Room No. _____ at _____ o'clock p.m.

- CONDITIONS OF BOND: The defendant is hereby released on the conditions as indicated below:
- Appear in answer the charge in court until discharge or final order of court.
 - Obey all court orders and process, not leave the State without permission of court and report changes of address to the Clerk within 24 hours.
 - Not commit any criminal offenses while awaiting final order in this case.
 - If on appeal, prosecute the appeal, and conform to custody if the judgment is affirmed or a new trial is ordered.
 - Surrender FOR ILCS 9-110-4(b)(2) OR not possess any firearms or dangerous weapons until final order in this case.
 - Not contact or communicate with any complaining witness or members of their immediate families or: _____
 - Not go to the home or premises of complaining witness, house, work, school or: _____
 - Not to indulge in intoxicating liquors, illegal drugs or certain drugs, to-wit: _____
 - Undergo alcoholism or drug addiction treatment as ordered by the court.
 - Undergo medical or psychiatric treatment as ordered by the court.
 - If you are charged with a criminal offense and the victim is a family or household member, you are ordered to refrain from all contact or communication with: _____
 - For a minimum of 72 hours following release, and further ordered to refrain from contacting and/or monitoring of the location of: _____
 - For a minimum of 72 hours following release: _____
 - Reside with parents or in a foster home, alcohol school or noncustodial program for youth, continue to follow support of house or in a foster home, wherever ordered by court.
 - Report to and remain under the general supervision of such agency or third party caretaker as ordered by the court.
 - Other condition: _____

CONDITIONS - Continued on reverse side.

NOTICE TO PERSON PROVIDING BAIL MONEY OTHER THAN THE DEFENDANT

- I understand that the money I have posted is for the bail for the defendant named on this bond in the above numbered case or cases.
- I understand that even if the defendant follows all court orders, that this money may be ordered by the judge to pay for the defendant's attorney fees, court costs, fines, fees and/or restitution to the victim, and that I may lose all or part of my money.
- I understand that if the defendant fails to comply with the conditions reflected on this bond, I may lose all of my money should the court enter a forfeiture of bail order.
- I understand in all cases, 10% of any amount posted as bail is retained by the Clerk of the Circuit Court, by law.

Provider's Name (Print): _____
 Relationship to Defendant: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Area Code/Telephone No.: _____
 Provider's Signature: _____

This bail bond form was prepared by: _____
 Signature of Peace Officer: _____
 Signature of Deputy Clerk: _____
 Sheriff or Suburban Court: _____