

District Court of _____ County , Colorado Court Address: Telephone No.: <hr/> THE PEOPLE IN THE INTEREST OF: Child and Concerning, Parent/Guardian	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg.#: _____	Case Number: Arrest Number: Warrant Number: Bond Number: Division _____ Courtroom _____

APPEARANCE BOND

BOND TYPE: Bail Bonding Agent * Cash/Self Cash/Surety ** **PR/Self** PR/Surety Property

BOND POSTED FOR: Defendant Respondent Plaintiff Petitioner Juvenile

NAME OF PARTY (print or type): _____
First Middle Last DOB

The Party, as principal, and (print or type): _____,
 as surety, acknowledge that we are jointly and severally bound to the People of the State of Colorado, in the penal sum of _
 _per 7th judicial district chief judge bond schedule _____) DOLLARS, if there is a default upon the primary condition of
 this bond. The primary condition of this bond is that, if the Party shall personally appear in the (Court name and address):
 _____,

on (return date) _____ at (time) _9:00 a.m._____ and at each place, and upon each date, to which this
 proceeding is transferred or continued, until entry of an order for deferred prosecution or deferred judgment, plea of guilty, *nolo contendere* or
 conviction (unless the written consent of the sureties is filed of record), to answer charges of _____ then this bond shall be void;
 otherwise, it shall remain in full force and effect. **NOTE: If the return date and time is a legal holiday or a weekend, the return date is a mandatory
 appearance on the first business day thereafter.** **ADDITIONAL STANDARD CONDITIONS:** (1) Party may not leave the state without approval of
 the Court and the surety; (2) Party shall not commit a felony while at liberty on bail; (3) Party acknowledges the existence of a mandatory restraining order
 under C.R.S. 18-1-1001; (4) Party shall immediately notify the Court of any change of mailing address or residence. **SUPPLEMENTAL CONDITIONS:**

**NO USE, POSSESSION, OR CONSUMPTION OF ALCOHOL OR CONTROLLED SUBSTANCES; NO POSSESSION OF WEAPONS; AND
 THE JUVENILE SHALL COMPLY WITH THE TERMS AND CONDITIONS OF THE PRE-ADJUDICATION SERVICES PROGRAM.**

If the Party fails to comply with any of the conditions of this bond, the Court may revoke the Party's release on bail, increase the amount of bail
 or modify bond conditions. This bond will be forfeited if the party does not appear as required by the primary bond condition. **SB-94 has no
 financial liability.**

X _____
 PARTY SIGNATURE (Juvenile) ADDRESS (Street, City, State & Zip Code) TELEPHONE NUMBER

 SURETY/BONDING AGENT/PARENT * /BONDING COMMISSIONER/JUDGE SIGNATURE ADDRESS (Street, City, State & Zip Code) TELEPHONE NUMBER

BONDING AGENT LICENCE NO. _____ POWER OF ATTORNEY NO _____

 SURETY OTHER THAN BONDING AGENT ** SIGNATURE ADDRESS (Street, City, State & Zip Code) TELEPHONE NUMBER

*** BONDING AGENT CERTIFICATION:** Agent, by executing this bond, warrants and represents to the Court, under oath, and under penalty of perjury:
 (1) that agent is not currently in default in payment of any final judgment upon any bail bond forfeited in any Colorado jurisdiction; (2) that agent is duly
 licensed by the State of Colorado to execute this bond; (3) that agent, if a non-cash agent, is currently appointed by the corporate surety whose power
 of attorney accompanies this bond.

CASH SURETY (Signature) _____
 EXECUTED AND ACKNOWLEDGED by the above named in the presence of the undersigned at:

_____ (name of court or facility where bond written).

By: _____
 Deputy Clerk/Sheriff (As to Surety/Bonding Agent)

By: _____
 Deputy Clerk/Sheriff/SB-94 witness (As to Defendant)

(date) _____ (time) _____

(date) _____ (time) _____