## **PEACE BOND**

NAME_									
l.	TERM								
	S.810 C	C.C.		_ MONTH(S	S)(MAXIMI	JM TERN	Л 24 MON	THS)	
	COMM	ON LAW		_MONTH(S	)(MAXIML	JM TERM	1 36 MON	THS)	
II.	AMOUNT								
	\$		WITH/WIT	HOUT DEP	OSIT				
III.	CONDI' YOU SI (a)	HALL:	HE DEACE	& BE OF G	OOD BEL	ΙΔVΙΟR·			
	,			THE COUR				O O DV TI	
	(b)	COURT;		THE COOK	IVVII	KEQUIKI	בט וט טכ	730 61 11	76
	(c)	NAME, A	ADDRESS (	BATION OF OR TELEPH CER OF AN	HONE NUI	MBER &	PROMPTI	LY NOTIFY	Y THE
IV.		REPORTING:  N ADDITION YOU SHALL:  (a) REPORT TO A PROBATION OFFICER WITHIN:  (i) TWO WORKING DAYS, OR  (ii) ON OR BEFORE  BETWEEN THE HOURS OF 8:30 A.M. TO 4:00 P.M. AND THEREAFTER  REPORT WHEN REQUIRED BY THE PROBATION OFFICER AND IN THE  MANNER DIRECTED BY THE PROBATION OFFICER;							
	(b)	ASSESS DIRECT INCLUD  (i) (ii) (iii) (iv) (v) (vi) (vii) (viii) (ix) (x)	SMENT, CC ING, OR M ING ANY R PSYCHIAT ALCOHOL/ FINANCIAL DOMESTIC ANGER MA MARITAL/F GAMBLING TRADITION SWEAT LO LIFE SKILL OTHER:	CIVELY PAREDUNSELING AY BE DIRECTED TO THE PAREDUSE AND T	OR TREAT COLOGICA SE ISSUES ING; E ISSUES ISSUES; N ISSUES MONIES; G;	ATMENT Y YOUR I MENT PF AL COUN ES; ; S; HEALING	AS THE ( PROBATION ROGRAM, ISELING;	COURT IS ON OFFIC , FOR: NS, INCLU	ER, JDING
	(c)	AND PROVIDE SATISFACTORY WRITTEN PROOF OF ATTENDANCE & COMPLETION OF THE PROGRAM(S) TO YOUR PROBATION OFFICER BY THE DATE SPECIFIED BY YOUR PROBATION OFFICER.  YOU SHALL SIGN A RELEASE OR WAIVER AS REQUESTED BY YOUR PROBATION OFFICER PERMITTING ACCESS TO ANY INFORMATION REQUIRED TO ASSIST IN YOUR SUPERVISION.							OUR
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(a)

INDIRECTLY WITH\_ EXCEPT TO ARRANGE ACCESS TO YOUR DEPENDENT CHILDREN THROUGH A MUTUALLY AGREED UPON THIRD PARTY OR BY

HAVE CONTACT OR COMMUNICATION IN ANY MANNER DIRECTLY OR

- COURT ORDER; OR EXCEPT AS MAY BE SPECIFICALLY APPROVED IN ADVANCE BY
- (ii) YOUR PROBATION OFFICER;

	(b)	ATTEND AT OR BE WITHIN A BLOCK/MILE RADIUS OF THE ADDRESS(ES) OR LOCATION(S) DESCRIBED AS:							
		EXEMPTION: YOU MAY RETURN TO THE ADDRESS							
		ON ONE(1) OCCASION ONLY, IN ORDER TO RETRIEVE PERSONAL PROPERTY, BUT ONLY IF ACCOMPANIED BY POLICE OR A MUTUALLY AGREED UPON THIRD PARTY, ON A DATE AND TIME AGREED UPON BY THE LAWFUL OCCUPANT THEREOF THROUGH THE VICTIM'S ADVOCATE OR THROUGH COUNSEL.							
	(c)	POSSESS ANY FIREARMS, AMMUNITION OR EXPLOSIVE DEVICES;							
	(d)	POSSESS ANYTHING THAT IS DESIGNED FOR USE AS A WEAPON, OR ANYTHING INTENDED TO BE USED AS A WEAPON;							
	(e)	PURCHASE, POSSESS, USE OR CONSUME ALCOHOL, OTHER INTOXICATING SUBSTANCES OR ANY NON-PRESCRIBED CONTROLLED DRUGS OR SUBSTANCES, AS DEFINED BY THE CONTROLLED DRUGS & SUBSTANCES ACT; YOU SHALL NOT INHALE INTOXICATING VAPOURS. YOU SHALL NOT PERMIT ANY OF THESE SUBSTANCES TO BE IN YOUR RESIDENCE.							
	(f)	HAVING ADVISED THIS COURT, PERSONALLY OR THROUGH COUNSEL THAT YOU AGREE TO PROVIDE SAMPLES OF YOUR BREATH, URINE OR BLOOD IN ORDER TO MONITOR COMPLIANCE WITH THE ABSTINENCE CLAUSE ABOVE. YOU SHALL SUPPLY ON DEMAND, TO YOUR PROBATION OFFICER OR A PEACE OFFICER, A SAMPLE OF YOUR BREATH, URINE OR BLOOD, IF YOUR PROBATION OFFICER OR A PEACE OFFICER REASONABLY SUSPECTS THAT YOU HAVE FAILED TO COMPLY WITH SUBSECTION (e) OR FOR THE PURPOSE OF RANDOM TESTING.							
	(g)	ENTER OR BE FOUND IN ANY PREMISES WHOSE PRIMARY PURPOSE IS GAMBLING OR THE RETAIL SALES OF ALCOHOLIC BEVERAGES;							
	(h)	YOU SHALL REMAIN UNDER THE CARE OF A MEDICAL PHYSICIAN OR THE PHYSICIAN'S DELEGATE OR A PHARMACIST & FOLLOW THEIR INSTRUCTIONS, INCLUDING THE TAKING OF PRESCRIPTION MEDICATION ONLY IN THE MANNER & AMOUNT PRESCRIBED.							
VI.	OTHE (a)	R CONDITIONS YOU SHALL PROVIDE FOR THE SUPPORT OF ANY DEPENDENTS;							
	(b)								
	(c)								
	(d)								