

**PUEBLO COMBINED COURT**  
501 North Elizabeth Street  
Pueblo, CO 81003  
(719) 404-8700

▲ COURT USE ONLY ▲

**THE PEOPLE OF THE STATE OF COLORADO**

v.

\_\_\_\_\_, Defendant

Case No: \_\_\_\_\_

Division: \_\_\_\_\_

**APPEARANCE BOND**

**Bond Type:**  Bail Bonding Agent \*  Cash/Self  Cash/Surety/3<sup>rd</sup> Party Payer  PR/Self  PR/Surety  
 Property

**Payment Method:** (for cash/self or cash/surety/3<sup>rd</sup> party payer bonds)  Cash  Certified Check  Online (jail only)

**Bond Posted For:**  Defendant  Respondent  Plaintiff  Petitioner  Child

**Name of Party:** (print or type) \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

**Name of Surety:** (print or type) \_\_\_\_\_

**CONDITIONS:**

The Party, as principal, and the Surety acknowledge that we are jointly and severally bound to the People of the State of Colorado, in the penal sum of \_\_\_\_\_ (\$\_\_\_\_\_) Dollars, if there is a default upon the primary condition of this Bond.

The bail agent charged a premium in the amount of \$\_\_\_\_\_.

The primary condition of this Bond is that the Party shall personally appear in the PUEBLO COMBINED COURT, 501 North Elizabeth Street, Pueblo, Colorado 81003 on (return date) \_\_\_\_\_, at (time) \_\_\_\_\_

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.

I agree to a continuance of this bond through sentencing; to answer charges of: \_\_\_\_\_

**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 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 Protection Order and shall comply with any required firearm relinquishment provisions under C.R.S. § 18-1-1001 and same is a condition of this bond;
- (4) Party shall immediately notify the court of any change of mailing address or residence.

Pursuant to §16-3-503 C.R.S. you shall execute a waiver that states you understand that the bond or fees shall be forfeited if Defendant is removed from the country.

If you have been arrested for a Felony offense, you shall sign a written waiver of extradition indicating you waive all formal proceedings in the event you are arrested in another state and you agree to be returned to Colorado.

Pre-trial Supervision by Recovery Monitoring Solutions Corporation, 807 W. 4<sup>th</sup> Street, Pueblo, Colorado (719) 543-7835 with:  
 Basic Supervision  Enhanced Supervision  Intensive Supervision

Day Reporting with UA only  Day Reporting  Mobile Breath Testing  Electronic Substance Abuse Monitoring  
 Day Reporting for 28 days from posting of bond with automatic expiration on full compliance.

Mobile Breath Testing for 28 days from posting of bond with automatic expiration on full compliance.

Electronic Substance Abuse Monitoring for 28 days from posting of bond with automatic expiration on full compliance.

Electronic Monitoring as determined by Bonding Commissioner

DUI Supervision:  Level 1  Level 2  Level 3

No Weapons     No Alcohol     No Drugs     No Marijuana Use     No Marijuana Use Unless Valid Medical Card

No Driving Without Valid License and Insurance

No contact with any victim(s)     No contact with co-defendant (name) \_\_\_\_\_

Other: \_\_\_\_\_

**If party fails to comply with any conditions of this Bond, the court may revoke party's release on bail, increase amount of bail or modify bond conditions. This Bond will be forfeited if party does not appear in court as required by primary bond conditions.**

**You are not required to agree to apply the cash bond deposited in this case toward any amount owed as a condition of release. Use of the deposit for such purpose may only occur if you voluntarily agree in writing to such use. Please choose one of the following:**

**Use of Cash Bond: (only filled out by Defendant if selecting cash/self bond type)**

**I consent** and authorize the court to apply the cash bond deposited in this case to any and all court costs, restitution, fines, fees and surcharges owed by me at the time I am discharged from all liability under the terms of the bond. Any funds remaining must be returned to me as defendant at the address provided below.

**I do not consent** or authorize the court to apply the cash bond deposited in this case toward any amount owed by me.

**SIGNATURES:**

**Party**

Signature \_\_\_\_\_ Mailing Address (including City, State, & Zip Code) \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Bail Bonding Agent\* (or Bonding Commissioner)**

Signature \_\_\_\_\_ Mailing Address (including City, State, & Zip Code) \_\_\_\_\_ Telephone Number \_\_\_\_\_

Bonding Agent License No: \_\_\_\_\_ Power of Attorney No: \_\_\_\_\_

**\*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.

**Surety/3<sup>rd</sup> Party Payer (other than Bail Bonding Agent)**

Signature (skip for online 3<sup>rd</sup> Party Payers) \_\_\_\_\_ Print Name \_\_\_\_\_

Mailing Address (including City, State, & Zip Code) \_\_\_\_\_ Telephone Number \_\_\_\_\_

Social Security Number \_\_\_\_\_  Copy of identification included.

**Note:** The IRS requires that some Cash bonds over \$10,000 may require completion of IRS form 8300 by the court. Verification of cash surety identification and social security number are required. Verification by driver's license or passport is preferred but can occur through alien registration card or other official documents.

**Executed and acknowledged** by the above named in the presence of the undersigned at:

By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Deputy Clerk/Sheriff (As to Surety/Bonding Agent)

By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Deputy Clerk/Sheriff (As to Defendant)