

HAWAII RULES OF PENAL PROCEDURE

Form J

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BAIL/BOND RECEIPT, ACKNOWLEDGMENT, AND NOTICE TO APPEAR

BBRA No.

Case No.

Arresting Agency:	State ID (SID)/Booking No. (if applicable):	Date:
Charge(s)/Statutory Section(s):	Arrest Report/Citation No(s):	Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

Release Based On: ☐ ROR ☐ CASH deposited by DEFENDANT ☐ CASH deposited by THIRD PARTY SURETY ☐ PAPER BOND posted by LICENSED SURETY INSURANCE COMPANY/AGENT (Attach Copy of Paper Bond and Copy of Agent's Power of Attorney)	(For Judiciary Use Only)
BAIL/BOND FOR (Defendant's Name) _____ DOB: _____ LAST 4 DIGITS OF SSN: XXX-XX- _____ PHONE: _____ ADDRESS: _____ AMOUNT RECEIVED: \$ _____ ☐ ROR CERTIFIED/CASHIER'S CHECK NO. OR POWER OF ATTORNEY NO. _____	
APPEARANCE INFORMATION: YOU ARE TO APPEAR IN THE FOLLOWING COURT CHECKED BELOW (address on back): COURT DATE AND TIME: _____ / _____ AM/PM (circle one)	

DEFENDANT'S ACKNOWLEDGMENT OF TERMS AND CONDITIONS FOR RELEASE ON BAIL OR RECOGNIZANCE

In order to be admitted to bail and released from custody or released on recognizance, I agree to comply with the terms and conditions of release on bail or recognizance set forth herein, all conditions imposed by law, and any additional conditions that a court may later impose on me. I specifically understand and agree that:

- I must appear in person for all court hearings, including the hearing set forth above. If I fail to appear, my release will be revoked, a bench warrant will be issued for my arrest, and I may be charged for bail jumping or contempt of court.
- I will remain in the State of Hawaii unless I obtain court approval to leave the jurisdiction.
- I will not commit a federal, state or local offense during the period of release.
- The court may **REVOKE MY RELEASE** if any term or condition of release is violated.
- If, at any time, I fail to appear in court on the day and at the time indicated on this Receipt, Acknowledgment, and Notice to Appear Form or any other day and time ordered by the court, any cash or bond posted for my release **WILL BE FORFEITED** to the State and **NOT RETURNED**.
- Any cash I have personally deposited as security for this bond shall be applied to pay any fines, restitution, costs and/or fees that I may be ordered to pay in this case.

Date	Print Name of Defendant	Defendant's Signature
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NOTIFICATION TO THIRD-PARTY SURETY OF BAIL BOND CONDITIONS/OBLIGATIONS

I have read and understand the terms and conditions of bail signed by defendant. I understand that this is a continuing bond that will remain in full force and effect, unless otherwise ordered by the court, until final determination of all proceedings in this case, including appeal. If I wish earlier discharge from liability on this bond, I must surrender Defendant to the custody of any sheriff, chief of police, or their authorized subordinates. I understand that if Defendant fails to appear in court on the day and at the time indicated on this Receipt, Acknowledgment, and Notice to Appear Form or any other day and time ordered by the court, judgment for the full amount of this bail bond shall be entered in favor of the State. Any request to show good cause why the court should vacate the judgment of forfeiture must be filed within thirty (30) days from the date notice of the entry of judgment in favor of the state is given via personal service or certified mail, return receipt requested.

- ☐ If cash was deposited as security for the full amount of this bond, the full amount will be forfeited to the State and not returned to me.
- ☐ If a paper bond was filed, surety is required to pay the full amount of the bond to the State in execution of the judgment unless a) the court sustains the surety's motion or application submitted pursuant to HRS § 804-51 and vacates the judgment based on a showing of good cause or b) defendant is surrendered to law enforcement officials pursuant to HRS §§ 804-14, 804-41, and 804-51.

Telephone No.	Print Name of Third Party Surety or Agent	Driver License/Other ID No.
Date	Signature of Third-Party Surety or Agent	Preferred Mailing Address of Third-Party Surety

NOTE: COPY OF PAPER BOND AND COPY OF AGENT'S POWER OF ATTORNEY MUST BE ATTACHED IF PAPER BOND FILED.

LAW ENFORCEMENT OFFICER/CLERK			
Date	Print Name/ID No.	Officer/Clerk's Signature	Agency

(BAR CODE)

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COURT ADDRESSES - _____ CIRCUIT

CIRCUIT COURTFAMILY COURTDISTRICT COURT

COURT USE ONLY

BAIL POSTED	\$
BAIL APPLIED TO FINES	\$
TOTAL REFUND	\$

Bailor's Signature (person who posted bail)

In accordance with state and federal disability laws, if you require an accommodation for a disability when working with a court program, service, or activity, please contact the District Court Administration Office at PHONE NO. (808) 538-5121, FAX (808) 538-5233, or TTY (808) 539-4853 at least ten (10) working days before your proceeding, hearing or appointment date.

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