

Prosecutor
 Defense Counsel
 AMHD/Courts & Corrections [fax: (808) 832-1855]
 Sheriff Div. [Hilo fax: (808) 933-8836; Kona fax: (808) 322-8788]
 Probation [Hilo fax: (808) 961-7676; Kona fax: (808) 443-2188]
 HISC [Hilo fax: (808) 933-8826; Kona fax: (808) 323-4571]
 HCCC [fax: (808) 933-0447]
 AMHD, UM [fax: (808) 453-6995]
 Fiscal

IN THE _____ COURT OF THE THIRD CIRCUIT
 _____ DIVISION
 STATE OF HAWAI'I

STATE OF HAWAI'I

vs.

_____ ,

Defendant.

CASE NO. _____

**ORDER REINSTATING RELEASE ON
 CONDITIONS AND GRANTING THE
 WITHDRAWAL OF STATE'S MOTION TO
 REVOKE RELEASE ON CONDITIONS**

[§704-406]

Hearing Date

Date: _____

Time: _____

Next Hearing

Date: _____

Time: _____

JUDGE: _____

**ORDER REINSTATING RELEASE ON CONDITIONS AND GRANTING THE
 WITHDRAWAL OF STATE'S MOTION TO REVOKE RELEASE ON CONDITIONS**

The matter of the State's request to withdraw its Motion to Revoke Release on Conditions of Defendant in the above-entitled matter came on for hearing before this Court on _____ at _____ .m. with Defendant physically present present by video. Defendant's counsel, _____, and the State of Hawai'i, represented by Deputy Prosecuting Attorney, _____, were also present.

The Court, having considered the request of the State, the records and file in this case, and for good cause appearing,

IT IS HEREBY ORDERED that:

1. The State's Motion to Revoke Release on Conditions of Defendant in the above-entitled matter is hereby WITHDRAWN;
2. The Defendant shall be released from the custody of the Director of Health forthwith;
3. The Defendant shall remain subject to the terms and conditions of the Release Conditions ordered by this Court prior to the filing of the State's Motion to Revoke Release on Conditions; and
4. The Defendant is ordered to appear for a review hearing on

_____ at _____ .m. in the above-entitled Court.

DATED: _____, Hawai'i, _____.

JUDGE OF THE ABOVE-ENTITLED COURT

APPROVED AS TO FORM on _____:

Deputy Prosecuting Attorney

Defense Counsel

Print Name

Print Name



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation. Call the ADA Coordinator at 808-961-7629, Fax 808-961-7577 or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator will try to provide, but cannot guarantee, the requested auxiliary aid, service, or accommodation.