

## Court Order for Alcohol Monitoring

Defendant's Name: \_\_\_\_\_

SPN/Booking # \_\_\_\_\_  Pretrial  Sentenced

Case # \_\_\_\_\_

Charge: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ Cell \_\_\_\_\_

Device:  SCRAM  SCRAM w/house arrest  i Alco Supreme  
 BI SL2  Random Breath Testing

**Please check all that apply:**  No restrictions  Curfew  House Arrest

**Areas of Inclusion:**  County  Judicial District  Other (specify below)

\_\_\_\_\_  
\_\_\_\_\_

Hours: \_\_\_\_\_

Exceptions:  Work  School  Treatment  Religious activities

Case related probation/court ordered programs  Attorney  Court date

Other \_\_\_\_\_

Areas of exclusion (specify below):

\_\_\_\_\_  
\_\_\_\_\_

Party/Parties to be notified of violations contact information: Phone/email

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By Order of Judge \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

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