

IN THE STATE COURT OF FULTON COUNTY  
STATE OF GEORGIA

STATE OF GEORGIA

CASE # \_\_\_\_\_

V.

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:  
:  
:  
:  
:  
:

\_\_\_\_\_  
DEFENDANT

PRETRIAL/COMPLIANCE ORDER

It is the order of this Court that the Defendant comply with the following conditions and requirements.

I.

The defendant shall make restitution to his/her victim in the amount stated below and/or obtain and pay for treatment for the following:

- |  |  |
|--|--|
| _____ Domestic Violence Intervention (24 weeks)<br>(Treatment facility must be court-approved) | _____ Anger Management (12 weeks) (2 day)<br>(Treatment facility must be court-approved) |
| _____ Substance Abuse Assessment and Treatment   | _____ Psychiatric Evaluation   |
| _____ Parenting Classes  | _____ Community Service (at qualified non-profit organization)                           |
| _____ Restitution \$ _____   | _____ Other _____  |
| _____ Reinstate Drivers License  | _____ Defensive Driving  |

II.

The defendant shall comply with the following conditions:

1. Have no further violent contact with \_\_\_\_\_.
2. Enroll in treatment by \_\_\_\_\_.
3. Appear for a compliance hearing in Courtroom 2A, Fulton County Courthouse, 185 Central Avenue, Atlanta, Georgia, 30303 on \_\_\_\_\_ at \_\_\_\_\_. If the Defendant provides the Court with proof of successful progress in treatment or community service, then Defendant may be excused from appearing. Only the Court can excuse the Defendant from appearing at the compliance hearing. (Proof must be in writing on treatment facility letterhead).

ORDERED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
JUDGE, STATE COURT

ACKNOWLEDGEMENT

The defendant acknowledges that he/she has received a copy of this Order and that he/she must complete treatment, show proof to the court, make any ordered restitution and comply with all special conditions and protective orders for the court to consider an order of dismissal or dead docket of his/her case.

\_\_\_\_\_  
Defendant

\_\_\_\_\_  
Victim

Telephone No. \_\_\_\_\_