

STATE OF INDIANA)
)ss:
COUNTY OF DEARBORN)

IN THE DEARBORN SUPERIOR COURT ____

GENERAL TERM, 20____

STATE OF INDIANA)
)
 v.)
)
)
_____)
_____)
_____)

INFORMATION FOR:
FAILURE TO APPEAR
I.C. 35-44.1-2-9(a)
LEVEL 6 FELONY

CAUSE NO. _____

DOB: _____)
OLN: _____)

The undersigned affiant does hereby swear or affirm under penalties for perjury that:

On or about the ____ day of _____, 20____, in Dearborn County, State of Indiana, _____, having been released from lawful detention on condition that he/she appear at a specified time and place, to-wit:

in connection with a charge of a crime, did intentionally fail to appear at said time and place, and said charge of a crime was a felony charge, to-wit:

_____.

All of which is contrary to the form of the statute in such cases made and provided, to-wit: I.C. 35-44.1-2-9(a) and against the peace and dignity of the State of Indiana.

Approved by:

LYNN M. DEDDENS
Prosecuting Attorney,
Seventh Judicial Circuit

Date: _____

By: _____
Deputy Prosecuting Attorney

State's Witnesses:

