

**FAMILY APPEARANCE BOND**

JD-FM-131 Rev. 3-17  
C.G.S. §§ 46b-215, 46b-231  
P.B. § 38-5

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
[www.jud.ct.gov](http://www.jud.ct.gov)

COURT USE ONLY

FAPBOND



Judicial District of

Address of Court

Docket number

Name of Obligor (*Person required by court to post bond*)

Address of Obligor

Telephone number (*Area code first*)

Amount of bond

\$

Appearance date and time

I, the obligor named above, promise to come to the court named above on the Appearance Date and Time shown above and at any other place and time to which this case may be continued.

I also understand that I am being released on a: (select one)  Cash  Surety Bond in the above amount to insure my appearance as promised above.

I also understand that if I do not come to court as I promised above,

**1. I may lose the full amount of the bond posted and the Family Support Magistrate may order the proceeds distributed in accordance with Title IV-D of the Social Security Act.**

**2. A capias mittimus for my arrest may issue.**  
Section 46b-231 of the Connecticut General Statutes

Signed (*Obligor*)

Date signed

**Notice to Correction Official:**

Upon receipt of funds related to a cash or surety bond, follow the instructions on either the *Family Capias Transmittal*, form JD-FM-204, or the *Family Mittimus Transmittal*, form JD-FM-205, that was attached to the capias or mittimus form.

**Complete the appropriate section below for a cash or surety bond**

<b>Cash Bond</b>	Amount of bond	Amount deposited in words		
	\$			
	Deposited by ( <i>Name and address of depositor</i> )			Telephone number ( <i>Area code first</i> )
	Cash taken by ( <i>Assistant Clerk, Correction Official</i> )		Date and time bond taken	Receipt number
	I, the Depositor, understand that if the obligor does not come to court as promised above, I will be liable for the full amount of the bond.			
	I also understand that upon discharge of the bond, as specified above, the amount deposited will be returned to the Depositor.			
Signed ( <i>Depositor</i> ) ►		<i>The above information and statements were subscribed and sworn to before me.</i>		
Date signed	Signed ( <i>Assistant Clerk, Correction Official</i> )		Date and time signed	
Name and address of surety			Telephone number ( <i>Area code first</i> )	
License number		Total amount of bail licensed to give	Total amount now surety to ( <i>Exclusive of this case</i> )	
\$		\$		
I understand that if the obligor does not come to court as promised, I will be liable to the State of Connecticut or to the obligee in this case for the Amount of Bond.				
Signed ( <i>Surety</i> ) ►		Date signed		
<i>The above information and statements were subscribed and sworn to before me.</i>				
Signed ( <i>Assistant Clerk, Correction Official</i> )		Date and time signed		
<b>For Court Use Only</b>				
File Date				

**ADA Notice**

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at [www.jud.ct.gov/ADA/](http://www.jud.ct.gov/ADA/).