

FAMILY CAPIAS TRANSMITTAL

JD-FM-204 Rev. 3-08

STATE OF CONNECTICUT**SUPERIOR COURT**www.jud.ct.gov**Instructions To Clerks And S.E.S. Offices:**

Complete this form, check the appropriate boxes
in sections A and B below.

Be sure to include your address.

Attach the form to the Capias for D.O.C. processing.

Instructions To D.O.C:

When receiving funds, follow instructions as
marked in Section A.

When forwarding funds, follow instructions as
marked in Section B.

Return this form along with the check payable to:
"State of Connecticut".

	Docket number
Name of case	Date of capias

Correctional Facility Responsibilities:**A. Required when receiving funds at a D.O.C. Correctional Facility:**

Appearance Bond — Execute Family Appearance Bond form number JD-FM-131.

Prepare D.O.C. receipts

**Forward this document along with the appropriate paperwork to the
Inmate Trust Fund, 24 Wolcott Hill Road, Wethersfield, CT 06109**

Inmate Trust Fund Responsibilities:**B. Required when forwarding funds from the Inmate Trust Fund Unit:**

(All checks payable to "State of Connecticut")

Send to: Clerk's Office, _____
(address)

Family Support Magistrate Docket Capias

Family Docket Capias (Non-S.E.S.)

Family Docket Capias (S.E.S. involved)

Send to: S.E.S., _____
(address)

U.I.F.S.A. Capias

Signed (Clerk/S.E.S. Office)	Telephone number (with area code)
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