

CAFA COVER SHEET

Date: _____ Defense Attorney _____ File No: _____

Call Time _____ AM/PM Arrival Time _____ AM/PM

Arraignment Time _____ AM/PM Completion Time _____ AM/PM

Type of Arraignment: Appearance ticket In-custody Warrant (Circle One) Bench Arrest Other: _____

Defendant Name: _____ DOB: _____ Sex M F

Address: _____

Phone (H) _____ (Cell) _____ (Bus) _____

Employer _____ Address _____ Phone _____

Eth: Hisp, Non-Hisp.
(circle any that apply)

Race: Asian, BL, WH, Other.
Veteran: YES NO

Born in USA? Y N.
Citizen of US? Y N Green Card? Y N

Court: _____ Judge: _____ ADA: _____ **CHECK IF ADA NOT PRESENT**

Charges: _____

Return Date: _____ Time: _____ Court to return to _____

Prelim: Y N

Prelim Waived: Y N

Victim: _____ Co-Def: _____ Witnesses: _____

DID DEFENSE MOVE TO DISMISS? Yes No N/A If yes, motion was: Denied Granted Adjourned

BAIL REQUESTED? Yes No If yes, please provide information on:

Defense's request: _____ ADA's request: _____

BAIL SET? Yes No If yes, amount set: CASH _____ BOND _____ Check if bail posted at arraignment

RELEASE STATUS: ROR RUS Remanded Other: _____

DISPOSITION: No disposition at arraignment Dismissal ACD Guilty plea, top charge
 Guilty plea, lesser charge Other: _____

OUTCOMES:

- None
- Order of protection (If OP, party protected: _____)
- Driver's license suspended
- Other: _____

Application with instructions for Public Defender provided? Y N

Getting private attorney? Y N

Refused or Waived representation at arraignment? Y N

ATTORNEY ASSIGNED: _____ **CHECK IF NO ASSIGNMENT**