2026 PERRY COUNTY
DEFENDANT'S INFORMATION AND
ACKNOWLEDGMENT OF REPORTING PROCEDURES FOR FELONY BOND
(PLEASE PRINT NEATLY – <u>COMPLETE THE ENTIRE FORM</u>)

Name: _____
Last First Middle

DOB: _____/_____/_____SSN:_____AGE: _____RACE:_____SEX:_____

Address: _____

City:_____ State: _____ Zip: _____

Cell Phone #: _____ Alternate Phone #:_____

Attorney (if applicable)_____

Email Address:_____

Present Employment: _____Work Phone#:_____

Additional Contact Person:_____Relation:_____

Phone:_____Address:_____

I acknowledge that I have been told the following reporting requirements while I am out on felony bond in Perry County, Mississippi:

- I understand that I must check in with my bonding company at least once a month.
- I understand that I must report to the **Perry County Justice Court** located at 103 First Street, New Augusta, MS the following dates in 2026 from **8:00am-10:00am**:

Monday, January 12th
Monday, May 11th
Monday, November 9th

I understand that failure to report can result in the forfeiture of my bond and a bench warrant will be issued.

_____ _____
BONDING COMPANY DEFENDANT

_____ _____
BONDING AGENT CO-SIGNER

_____
DATE