

Six Month Report to Court Reviewing Conditional Release of an Insanity Acquittee

DATE OF REPORT:

MAIL TO:

The Honorable:

Court Name:

Court Address:

RE: AcquitteeName:

Court Case No(s).:

Date of Conditional Release Order:

GENERAL CONDITIONS OF RELEASE

<u>Condition Description</u>	<u>Level of Compliance</u>	<u>Comments</u>
1)	. Never . Sometimes . Always	
2)	Never Sometimes Always	
3)	Never Sometimes Always	
4)	Never Sometimes Always	

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GENERAL CONDITIONS OF RELEASE

<u>Condition Description</u>	<u>Level of Compliance</u>	<u>Comments</u>
5)	. Never . Sometimes . Always	
6)	Never Sometimes Always	
7)	Never Sometimes Always	
8)	Never Sometimes Always	
9)	Never Sometimes Always	
10)	Never Sometimes Always	
11)	Never Sometimes Always	
12)	Never Sometimes Always	

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SPECIAL CONDITIONS OF RELEASE

<u>Condition Description</u>	<u>Level of Compliance</u>	<u>Comments</u>
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- | | | |
|----|--|--|
| 1) | <ul style="list-style-type: none">. Never. Sometimes. Always | |
| 2) | <ul style="list-style-type: none">NeverSometimesAlways | |
| 3) | <ul style="list-style-type: none">NeverSometimesAlways | |
| 4) | <ul style="list-style-type: none">NeverSometimesAlways | |
| 5) | <ul style="list-style-type: none">NeverSometimesAlways | |
| 6) | <ul style="list-style-type: none">NeverSometimesAlways | |
| 7) | <ul style="list-style-type: none">NeverSometimesAlways | |

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SPECIAL CONDITIONS OF RELEASE

<u>Condition Description</u>	<u>Level of Compliance</u>	<u>Comments</u>
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8)

- . Never
- . Sometimes
- . Always

9)

- Never
- Sometimes
- Always

10)

- Never
- Sometimes
- Always

11)

- Never
- Sometimes
- Always

12)

- Never
- Sometimes
- Always

13)

- Never
- Sometimes
- Always

14)

- Never
- Sometimes
- Always

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SPECIAL CONDITIONS OF RELEASE

<u>Condition Description</u>	<u>Level of Compliance</u>	<u>Comments</u>
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15)	Never	
	Sometimes	
	Always	
16)	Never	
	Sometimes	
	Always	
17)	Never	
	Sometimes	
	Always	
18)	Never	
	Sometimes	
	Always	
19)	Never	
	Sometimes	
	Always	
20)	Never	
	Sometimes	
	Always	

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Comments on acquittee's progress and adjustment in the community this reporting period (including results of SA testing):

CSB Recommendation to the Court:

- . Continue conditional release
- . Modify current conditional release order
- . Revoke conditional release
- . Remove conditions of release

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If making a request for modification or removal of conditions, provide specifics of request and rationale:

If the individual completing this report is not the CSB NGRI Coordinator then both signatures are required, otherwise only the NGRI Coordinator must sign below:

Staff Completing Form:

NGRI Coordinator

Signature:

Signature:

Name:

Name:

Agency:

Agency:

Phone:

Phone:

Fax:

Fax:

Email:

Email:

CC:

Acquittee's Attorney:

Attorney for the Commonwealth:

DBHDS Office of Forensic Services: Fax: 804-786-9621 or

Email: csb.ngri@dbhds.virginia.gov or

Mail: P.O. Box 1797, Richmond, VA 23219