	SUMMONS (BREACH OF CONDITIONAL BOND)					Form S16		
						Court Use		
	Magistrates Court	Magistrates Court of South Australia						
	www.courts.sa.gov.au Sentencing Act 201	www.courts.sa.gov.au						
	Section 113(1)(a)(i)	-						
Registry				File No				
rtegisti y								
	Street Te			Telephone	Facsimil	e		
Address								
	City/Town/Suburb State Pos			Email Address	Email Address			
Informant								
Name		Giv	Given name/s		Informant's Reference			
Address	Street			Telephone	Facsimil	9		
c	City/Town/Suburb	State	Postcode	Email Address				
Defendant								
Full Name		DC			DOB			
	dd/mn					dd/mm/yyyy		
Address	Street		Т	elephone	Licence N	umber		
				E 3 A 1				
City/Town/Suburb State Postcode Email Address It is alleged that you have failed to comply with a condition of your bond, in that you:								
		-		-				
 failed to be of good behaviour by committing a further offence, namely failed to comply with the condition that you be under the supervision of a Community Corrections Officer and obey the lawful directions of the officer to whom you are assigned by ; 								
		, ,		, ce by				
 failed to comply with the condition that you perform community service by left the State for a reason without the written permission of the Chief Executive Officer for the Department of Correctional Services by 								
possessed	a firearm or ammunition or a	part of a firearm b	у					
failed to sul	omit to such tests (including t	esting without not	ice) for gu	nshot residue as	reasonably req	uired by		
☐ failed to comply with the condition that by								
Date bond ente	ered into:							
(a copy of the bon	d must be attached to this summ	ions)						
	Registry			Date	Date			
Hearing detail	s Address			Tim	е	am/pm		
	Telephone	Facsimile	acsimile Email Address					
	Date		MAGISTRATE / REGISTRAR / JUSTICE OF THE PEACE					
	NOTICE TO THE DEFEND							
• • • •	ear on the hearing date set or our absence, or	at above of on any	uay to Wi	non this matter is	aujourned the	Court may:		
•	int for your arrest							

Proof of Service							
Name of person serving:							
Address of person serving:							
Name of person served:							
Address at which service effected:							
Date service effected:							
Time of day:	Between	am/pm and	am/pm				
Method of service (tick box)							
🗌 pei	personally;						
by leaving a copy at the last (or most usual) place of abode with a person apparently residing there and not less than 16 years of age;							
by leaving a copy at the place of business with a person apparently employed there and not less than 16 years of age;							
any other method permitted by the Rules – specify:							
I certify that I served the attached document in the manner described.							
Certified this	day of	20					