

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES**

**REQUEST TO INCREASE BAIL (PC 1269c/1270.1) AND/OR RESTRICT SOURCE OF BAIL(PC 1275.1)**

Date/Time of Arrest:	Arrest File No.:	Arresting Agency:	Jail Location:	Booking No.:
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Arrestee/Suspect's Name (Last, First, Middle):	DOB:
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Arrestee/Suspect's Residential Address:	Location of Occurrence:
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Booking Charges:	Misdemeanor <input type="checkbox"/>	Felony <input type="checkbox"/>	Supplemental Holds/Warrant/Charges:
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Arresting Officer(s):	Requesting Officer:	Requesting Officer Badge No.:	Contact Phone No.:
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Current Bail (per Countywide Bail schedule):	<input type="checkbox"/> Request to Increase Bail to \$ _____
	<input type="checkbox"/> Request to Restrict Source of Funds Used to Post Bail (PC 1275.1)

**Provide the facts supporting your request for a bail increase AND/OR that probable cause exists for restricting the source of funds:**

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Additional facts sheet(s) and/or reports are attached hereto and are incorporated herein by reference.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Executed on \_\_\_\_\_ in the County of Los Angeles, California  
(Date) (Time)

\_\_\_\_\_  
(Signature) (Print Name) (Employee No.)

**FOR PROBATION USE ONLY**

Date: _____	Time: _____	Senior Investigator Aide _____
Application No. _____		Bail Commissioner _____
Teletype No. _____		Bail Set At \$ _____
		1275.1 <input type="checkbox"/> Granted <input type="checkbox"/> Denied

**FAX COMPLETED FORM TO BAIL DEVIATION AT (213) 487-6493**

**NOTE: A COPY OF THIS COMPLETED FORM MUST BE INCLUDED IN THE ARREST REPORTS TO BE GIVEN TO THE PROSECUTOR AND DEFENSE COUNSEL IF CRIMINAL CHARGES ARE FILED**