



PLAQUEMINES PARISH DETENTION CENTER STATEMENT OF SURRENDER



The undersigned **BAIL BOND PRODUCER** on behalf of _____,
wishes to **SURRENDER** said defendant and does hereby authorize _____,
as a licensed bail bond producer, licensed agent of the surety to take said defendant,

_____ into custody and surrender the defendant or cause the defendant to be surrendered into the custody of the Plaquemines Parish Sheriff's Office in the Parish of Plaquemines, State of LOUISIANA.

The lawful reason for the surrender/commitment is:

- | | |
|-------------------------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> BOND FORFEITURE | <input type="checkbox"/> FLIGHT RISK |
| <input type="checkbox"/> FAILURE TO COMPLY WITH BAIL REGULATIONS | <input type="checkbox"/> BAIL REVOCATION |
| <input type="checkbox"/> MOTION FOR SURETY TO PRODUCE DEFENDANT | <input type="checkbox"/> OTHER (BELOW) |

| | | |
|--------------------|-----------------|-----------------------------------|
| DEFENDANT | ALIASES | SSN |
| ADDRESS | CITY | STATE ZIP |
| DOB | RACE/SEX | DIVISION |
| #, Zi (| ITEM# | WARRANT # |
| VIOLATION | | |
| BOND AMOUNT | POA# | BOND DATE |

THE UNDERSIGNED SURETY/BAIL BOND PRODUCER further affirms that the above information is true and correct.

DATED THIS ____ DAY OF _____ 2025

BAIL BOND PRODUCER/AGENT OF SURETY

LAW ENFORCEMENT OFFICER

SIGNATURE