STATE OF MINNESOTA COUNTY OF HENNEPIN

State of Minnesota

Dennis Joseph Barry

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DISTRICT COURT FOURTH JUDICIAL DISTRICT

Case(s): 27-CR-21-10675

SILS: 877130 DOB:05/14/1977

Charge: FEL, Drugs - 5th Degree - Possess Schedule 1,2,3,4 - Not Small

| CONDITIONAL RELEASE ORDER | | | |
|---|--|---|---|
| | New Order | Amended Ord | er |
| You are released on any of the following marked options (and marked conditions): | | | |
| □ Post bail/ bond of \$ □ | with no conditions. | ☐ Post bail/bond of \$ | with the following conditions. |
| ☐ Post cash bail of \$ | with no conditions. | • | with the following conditions. |
| ☐ You are released with no bond, | bail, or conditions. | ☐ You are released with no b | oail on the following conditions. |
| 1. | contact (including through so | | ce Investigation interview. and where any such person is, |
| lives, works or goes to school, exce ☐ Solely to facilitate parenting tim | pt with a police escort to rec | | electronics, and toiletries |
| or written contact is permitted. | | | |
| 4. ☐ Stay away from5. ☐ Do not have any parenting time | with | 118 | nless allowed by Child Protective Services. |
| If a future order from Family Court or Juvenile Court allows parenting time, you may seek a modification to this order. | | | |
| 6. Do not possess a firearm or am 7. | · · | <i>3</i> ,, , | · |
| The following marked conditions require supervision by Probation. Sign releases to confirm your compliance. | | | |
| probation conditions. 9. Complete an in-custody substar to recommended treatment put 10. Within days of your relection Do not use any alcohol or non-Remote Electronic Alcohol Munedications to your supervising | Hennepin County, your Prob nce use assessment. You are no program without posting bon ease, complete a substance u prescribed controlled substa- onitoring (REAM) at your exp g officer. | released: upon completion on upon completion on upon further of upon further of upon further of upon further of upon further once. You are subject to random uponse. Take all prescribed medications. | f the assessment interview. court order. Follow recommendations. additions. m testing and/or tion only as directed; provide a list of all |
| Probation to be placed on EHM □ |] must report to Client and C ate EHM. If eligible, you are a | community Restoration at 3000 2 | emain in custody and be transported by additional street North, Minneapolis, s for job-seeking, work, school, treatment, |
| 14. | | | - |
| Internal Use Only REVIEWED WITH DEFENDANT, AND REL Treatment Self Other: | | Marta Chou, Judge Signature I have read and received a copy of | |
| Probation Officer's Signature | Date | Thave read and received a copy of | |
| Deputy's Signature | | Defendants Signature | January 25, 2022 |
| ,, 3 20 0 | | , | 2410 |