



Augusta Judicial Circuit
Administrative Office of the Courts

Honorable James G. Blanchard, Jr.
Superior Court Judge

Elaina Ashley
Accountability Court Coordinator
Augusta Judicial Circuit
Telephone (706) 821-1673
FAX (706) 849-3739
Email: eashley@augustaga.gov

Augusta Judicial Circuit Drug Court Referral Form

Date: _____

Name of Defendant: _____ Alias's: _____

Date of Birth: _____ Social Security Number: _____

Referring Source/Attorney: _____

Source/Attorney Phone Number: (____)____-____ Alternate Number: (____)____-____

Pending Case Number and Type of Charge:	Court Date:	For:
_____	____-____-____	_____
_____	____-____-____	_____
_____	____-____-____	_____

Physical Location of Defendant for Contact: Incarcerated: County: _____ Bonded:

_____	_____	_____	_____	(____)____-____
Street Address	City	State	Zip	Phone Number

Prior Offense(s) Case Number and Type of Charge:	Date:	For:
_____	____-____-____	_____
_____	____-____-____	_____

Comments: _____

This Completed Form Must be Mailed to:

Augusta Judicial Circuit Adult Felony Drug Court
Attention: Elaina Ashley, Program Coordinator
735 James Brown Blvd., Suite 2200
Augusta, GA 30901

OR Faxed to: (706) 849-3739

OR Emailed to: eashley@augustaga.gov