You are assuming specific obligations – READ CAREFULLY

to me known to be the person described in and executed the same.	thereupon acknowledged to me that	on thisth
before me personall	TY OF	TATE OF
D.O.B	S.S. NO	EDRIVER'S LIC.
ZIP	EMPLOYMENT	Indemnitor SIGNATUREADDRESS
ZIP	EMPLOYMENTCITYS.S. NOS.S. NO	Indemnitor SIGNATUREADDRESS NAMEADDRESS PHONEDRIVER'S LIC.
ZIPD.O.BZIP	EMPLOYMENTCITY	Defendant SIGNATUREADDRESS NAMEADDRESS PHONEDRIVER'S LIC
ABLE	ON THIS BOND IS NOT RETURNABLE	IN TESTIMONY WHEREOF we have hereunto set ou Day of THE PREMIUM PAID
is executed, or is about to execute in behalf of endore at the insistence of the indemnitor(s), the bornd or undertaking described in the foregoing and indemnity herein provided, which application is hereby referred to and make part of this agreement, are action of the execution by the Company of such board or undertaking, the indemnitor(s) coverant(s) and agreed with the Company as clowes. It is also will at all times and explanation of the execution of your described part of the agreement, and against the Company by feason or in consequence of having accorded such board or undertaking and and only a service the company of the indemnitor(s) and exhibit the Company by the execution of such board or windertaking and any one of the execution of such board or windertaking and any one of the execution of such board or windertaking and any one of the execution of such board or windertaking and any one of the execution of such board or such board or undertaking and any one of the execution of such board or such board or undertaking and any one of the execution of such board or such board or undertaking and any one of the execution of such board or undertaking and any one of the execution of such board or such board or undertaking and any one of the execution of such board or such board or undertaking and any one of the execution of such board or such board or undertaking and executing of such part of the execution of such board or undertaking and executing of such part of the execution of such board or undertaking and executing of such part of the execution of such part of the execution of such board or undertaking any or incurred the execution of such part of the execution of such part of executing of such part of executing and such part of executing	execute in behalf of and/or at the insistence of the indemnitor(s), the bond or use, which application is hereby referred to and made a part of this agreement. The Company of succh bond or undertaking, the indemnitor(s) covenant(s) and agree(s) duly authorized agent, the premium(s) specified in said application at the times and is and keep indemnified the company and save harmless the Company from and a sense of every kind and nature, which the Company shall at any time sustain or incut eason or in consequence of having executed such bond or undertaking in behic se and make good to the Company, its successors and assigns, all sums and anot, parent and/or adjudication against the Company by reason of the execution of six insistence of the indemnitor(s) and before the Company shall be required to pay their hat the Company may pay or incur in any legal proceedings. The Company in discharge of italiability under or incurred in connection with any su conclusive evidence against the companitor(s) of the fact and amount of the liability or undertaking with Co-Sureties, or reinsures any portion of any such bond or undertaking with Co-Sureties, or reinsures any portion of any such bond or undertaking with co-Sureties, or reinsures any portion of any such bond or undertaking with co-Sureties, or reinsures any portion of any such bond or undertaking which may take over and assume, in whole or in part, the obligation of the pay which may take over and assume, in whole or in part, the obligation of the extended may such bond or undertaking any time take such steps as it may deem necessary to obtains its release fror the company shall deem the same advisable; and all expenses which the Company hereunder and the eatlured this agreement. The pay which may take over and assume, in whole or in part, the obligation of the vested and with all the powers and rights given to the Company hereunder and the real under this agreement. The company to give the indemnitor(s) notice of any fact or information combining to the company has	or Company han the security. ORE, in conside Indemnitor(s) Indemnitor(s) charges, legal adjudications or any of thems or any collateral handertaking, the co-sureties and or company shall expect the Company shall expect the condemnitor(s) thereby range of the all papers in further secular frecting its rigid against loss, or any liability on information or any liability or information or any liability and severe and all sums have every rigid against of the company shall of the liability or limit any or have every rigid ompany, its surely provision or proced acceptance or ptance at any or provision or a series of the deep of
	TY COMPANY (hereinafter called Company).	THIS AGREEMENT made between the undersigned hereinafter called indemnitor(s) and AMERICAN CONTRACTORS INDEMNITY COMPANY (hereinafter called Company) witnesseth:

ACIC FI 06 (Rev 6/04) Page 2 of 2

BAIL BOND APPLICATION & CONTRACT

American Contractors Indemnity Company A MEMBER OF HCC SURETY GROUP rport Bivd., 9™ Floor, Los Angeles, CA 90045 (310) 649-2663

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AGENT	DATE OF APPLICATION	PLICATION		
Offense	Case #	Power #	Amount	
Offense	Case #	Power #	Amount	
Offense	Case #	Power#	Amount	
Offense	Case #	Power #	Amount	
			Total Bond Amount	
Court	Appearance Date		Time	
Defendant's Full Name (First, Middle, Last)			Phone	
Birth	Place of Birth	Social Security No.		
Height Weight	Eye Color	Hair Color	Race	
Scars/Tattoos, Marks, etc.				
Address	Apt. #	- 1	***************************************	
City	State/Zip Code	() Own () Rent Landlord	lord	
Previous Address				
Present Occupation(s)	Previous	Previous Occupation(s)		
Employer	Shift	How	How Long	
Address	Job Title		Phone	
Previous Employer		How	How Long	
Union	# Focal			
Spouse Fill Name	Date of Birth	Social Security No	ON.	
Maiden Name	Occupation(s)			
Final Control of the	five Shids	H	How Long	
Address		Job Title	Phone	
Age Age		School/Employer	Phone	
Auto rear Make	Middel		Otale	
	Lien Holder			
Insurance Agent/Company				
Driver's License #	State	Expiration	The state of the s	
	Where			
On Probation/Parole Where		Probation/Parole Officer		
Credit Card Company	Acc	Account #		
Credit Card Company	Acc	Account #		
Attorney	Address		Phone	
RELATIVES/FRIENDS	ADDRESS, CI	ADDRESS, CITY STATE, ZIP	PHONE	
Mother				
Father				
Brother				
Brother				
Sister				ł
Sister				
Sister				
M-Law_				
F-Law				
Gr. Parents				
Best Friend				
Ex Spouse				
Dolotion		Delation		
COSIGNED No. 1 If Non-Bell How Long Known 2		COSIGNER No 2 If Non-Rel Ho	F Non-Bel How Long Known	
		4		
Address	Address	988		
City o Air		City & Zio		

Long Known? _	Relation: COSIGNER No. 1 If Non-Rel., How Long Known? Name Address City & Zip D.L. # Employer Title Address City & Zip Spouse Employer Spouse Employer 1. ** **Phore Title **Presonal or Credit Cards)					9		
	If Non-Rel., How	/ Long Known?				Phone		

atio	
COSIGNER No. 2 If Non-Rel., How Long Known?	lown?
Name	
Address	
City & Zip	
D.L. #	
Employer	
Title	
Address	
City & Zip	
Spouse	
Employer	
References (Personal or Credit Cards)	Phone
Ž.	
3.	

THE PREMIUM PAID ON THIS BOND IS NOT RETURNABLE

SIGNATURE OF DEFENDANT

DATE