

INDEMNITORS AGREEMENT

Defendant _____
Bond No. _____
Bond Amount _____
Bond Premium _____

Date _____
Case # _____

I understand that in co-signing this bond for obtaining the release of _____ that I am responsible for him or her appearing in Court each time he or she is so ordered; also I understand that I am responsible for payment of any Court costs for non-appearance should the defendant fail to appear and the Court forfeits the bond. Should it become necessary to apprehend and surrender the defendant to the Court, I understand that I am responsible for any and all expenses incurred as a result of such forfeiture and further, if such a forfeiture occurs and the defendant is not surrendered to Court within the time prescribed by law, I understand that I am required to pay the Full Amount of the bond posted, including unpaid premium.

Collateral cannot be returned until such time as the Company receives written notice from the Clerk of the Court verifying Exoneration.

I have read the above contract and understand it, and agree to fulfill ALL the provisions therein.

Co-signer Signature _____

Address _____

Agent _____

