

CALIFORNIA PLAIN TALK CONTRACT

AGENT INFORMATION:	CONTRACT DATE:
	BOND NUMBER:
	BOND AMOUNT:
	PREMIUM PAID:
1	understand that in eigning this hand for obtaining
1,	understand that in signing this bond for obtaining
the Court or Forfeits this bond, and it becomes necessar responsible for any and all expenses incurred as a resul	, that I am responsible rdered. If the defendant fails to follow any and all instructions or orders of ry to apprehend and surrender him/her to the Court, I understand that I am to f such forfeiture. Further, if a forfeiture occurs and the defendant is not law, I understand that I am required to pay the FULL AMOUNT of the bond
	on this bond is fully earned upon the release of the defendant from custody. rrested, or his/her bail reduced, or his/her case dismissed, shall not obligate
IMPORTANT NOTICES:	
BEEN EXONERATED. THE PROCESS OF RETURNING THE C	ANNOT BE RELEASED UNTIL ALL BONDS POSTED FOR THE DEFENDANT HAVE COLLATERAL MAY BE DELAYED IF THE BAIL AGENCY HAS TO RESEARCH AND PROCESS WILL BE FASTER IF I PROVIDE WRITTEN VERIFICATION FROM THE
ALL EXPENSES AS DESCRIBED IN THE INDEMNITY AGREE	MENT WILL BE DEDUCTED FROM COLLATERAL BEFORE RETURNED.
I UNDERSTAND THAT THE COLLATERAL SHALL BE RETURN COLLATERAL RECEIPT OR THAT PERSON'S LEGAL ASSIGN	RNED TO THE PERSON WHOSE NAME APPEARS AS THE DEPOSITOR ON THE IEE.
I am not a paid signer. I have no connection with a Bail Bon and agree to fulfill ALL of the provisions therein.	nd Consultant. I have read the above contract and understand the obligations,
Defendant Signature	Defendant Name (Print)
Indemnitor Signature	Indemnitor Name (Print)
Indemnitor Signature	Indemnitor Name (Print)

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