IUUU BAIL B	www.my1800bailbo	· · · · ·) 843-1223	Fax (818) 84	15-1550	
FA	X CREDIT CARD A	UTHORIZA	TION F	ORM		
	Today's Date:	_ / / Day	Year	_		
Transaction for a Bond on:	Date of Birth Full Legal Name of Defendant					
Bond Amount: \$	City/County/State: _	City, County, State whe	re the defendant	is being held or Nam	ne of Jail and State.	
Name of Card Holder:	Your name as it ap	ppears on credit card.				
Card Billing Address:						
		Zip_		BILLING Z	IP CODE REQUIRED	
Email Address:						
Telephone No:	(Cell No				
Credit Card No:						
Expiration Date:	/ CVV No:	3 digit #	7.411 (1999) (11) h		4 digit #	
Amount of Today's Charg	ge:	t in Written Words.		Dollars.	\$ Amount in Numerals.	

American Justice Bail Bonds

I hereby authorize the charging(s) of my credit card as indicated.

Visa____ MC____ Discover____ Amex ____ Other___

By signing this credit card authorization form you are also granting us permission to charge your card and the use of your signature on file for any additional charges that may arise in the future pertaining to your obligation/s as an indemnitor for this \$ ______ bail bond(s). The undersigned accepts and agrees to all of the bond terms and financial obligations as stated in the bail bond indemnity agreement and acknowledges that they are a part of this credit card authorization form for future charges. I agree to indemnify and hold harmless the surety or its agent for all losses in connection with this bond(s) not otherwise prohibited by law. Facsimile copy is considered as if an original.

NOTE: Charges are subject to a processing fee of 3% that will be subtracted from any refund or returns owed, an additional \$150.00 application/posting processing fee may be applied for any cancellation. Premium is fully earned upon the posting of the bond(s) with the jail or court.

I HAVE READ AND AGREE TO ALL OF THE ABOVE.

Card Holder's Signature:

Indemnitor / Card Holder :

Fax completed form(s) with copy	/ of your credit card and a	government issued I.D. to	o fax number/s (checked)	above. Then call 1-800-224-5266
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For Office Use Only: Below section to be completed by card merchant agent:

Card Type:

American Justice