

UNITED STATES FIRE INSURANCE COMPANY
 157 MAIN STREET, GREENVILLE, PA 16125
 P.O. BOX 806, GREENVILLE, PA 16125
 (800) 245-0366 | FAX (724) 588-8801
 EMAIL: COURTNOTICES@CFINS.COM

Bail Agent's Name, Address, Phone, Email & Bail License #

BAIL BOND

NO _____
 (POWER OF ATTORNEY WITH THIS NUMBER MUST BE ATTACHED)

IN THE _____ COURT OF THE _____ JUDICIAL DISTRICT, COUNTY OF _____ STATE OF ARIZONA

THE PEOPLE OF THE STATE OF ARIZONA

Plaintiff,

Case No. _____

vs

Div. No. _____

Defendant

Defendant _____
 (NAME OF DEFENDANT)

(BOOKING NO.)

having been admitted to bail in the sum of _____ (\$ _____) Dollars and ordered to appear in the above-entitled court on _____ 20 _____, on _____ charge/s.
 (STATE MISDEMEANOR OR FELONY)

Now, the **United States Fire Insurance Company, a Delaware Corporation**, as Surety hereby undertakes that the above named defendant will appear in the above-named court on the date above set forth to answer the charge above set forth to answer any charge in any accusatory pleading based upon the acts supporting the complaint filed against him/her and as duly authorized amendments thereof in whatever court it may be prosecuted, and will at all times hold him/herself amendable to the orders and process of the court, and if convicted, will appear for pronouncement of judgement or grant of probation; or if he/she fails to perform either of these conditions that the United States Fire Insurance Company, a Delaware Corporation, will pay to the people of the State of Arizona, the sum of _____ (\$ _____) Dollars.

If the forfeiture of this bond be ordered by the Court, judgement may be summarily made and entered forthwith, against the said United States Fire Insurance Company.

THIS BOND IS VOID IF WRITTEN FOR AN AMOUNT GREATER THAN THE POWER OF ATTORNEY ATTACHED HERETO, IF MORE THAN ONE SUCH POWER IS ATTACHED, OR IF WRITTEN AFTER THE EXPIRATION DATE IF SPECIFIED ON THE ATTACHED POWER OF ATTORNEY.



United States Fire Insurance Company
 (a Delaware Corporation)

By: _____
 ATTORNEY-IN-FACT

I certify under penalty of perjury that I am a licensed bail agent of the UNITED STATES FIRE INSURANCE COMPANY and that I am executing this bond on _____ (Date) at _____ (Location)

(SIGNATURE OF LICENSED AGENT)

THE PREMIUM CHARGED FOR THIS BOND \$ _____	Approved this _____ day of _____, 20_____ _____ (Title)
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NOTE: This is an Appearance bond and cannot be construed as a guarantee for failure to provide payments, back alimony payments, FINES, OR Wage Law Claims, nor can it be used as a Bond on Appeal.

CERTIFICATE OF DISCHARGE OF BOND

Power Amount: \$ _____ Power No: _____

This is to certify that on or about the _____ day of _____, 20_____, I examined the Records of this Court and find the corresponding power number above has been discharged of record by reason of the following disposition: _____ Pled Guilty _____ Found Guilty _____ Case Dismissed _____ Forfeiture Paid
 Other: _____ Date of Discharge: _____ Person rendering decision,

Witness my hand and official seal this _____ day of _____, 20_____. Title: _____

By: _____ (To the clerk of court, when the bond has been exonerated, please sign and return this form to the bail agent listed above.)