

Bankers Insurance Company

DISCLOSURE STATEMENT

Bail Agency:				
Bond Number:	·	_		
Bond Amount:				
Defendant:	e e e			
ATTENTION				
DO No	DISCLOSURE OF LIEN A OT SIGN THIS DOCUMENT UN) IT!
HAVE AN INTI	OND WILL BE SECURED BY REA EREST. THE FAILURE TO PAY TH F THE DEFENDANT TO COMPL RESULT IN THE LOSS	IE BAIL BOND PREMI Y WITH THE CONDIT	IUMS WHEN D	DUE OR THE
the Deed of Trust, read and understoc ment and Deed of Agreement you sig asked to execute t	d the above Disclosure Statement and please execute this Disclosure Statement of this Disclosure Statement and that y Trust. You are also responsible for an ned, and any lien against your properhis document again, in the corresponle, which, upon recordation terminates	at in the space provided be ou have received a compl y fees incurred by the Sur y will not be released un- ding space provided belo	elow, acknowledgineted copy of the Erety, as specified it til such fees are pow, upon delivery	ng that you have Bail Bond Agree- in the Bail Bond baid. You will be to you of a full
	Disclosure: The official version of this docu nation contained in the Spanish translation,			
	DISC	LOSURE		
	D UNDERSTOOD THE ABOVE DISCLO L BOND AGREEMENT AND DEED OF		HAVE RECEIVED	A COMPLETED
Print Name:		Print Name:		
Sign Name:		Sign Name:		
Date:		Date:		
TO THE COUNTY	A COPY OF A FULL RECONVEYANCE RECORDER FOR FILING, A CERTIFIC COPERTY TO SECURE PERFORMANCE	CATE OF DISCHARGE, O	R A FULL RELEAS	SE OF ANY LIEN
Print Name:		Print Name:	-	
Sign Name:		_ Sign Name:		
Data		Data		

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