

CREDIT CARD AUTHORIZATION

I _____ authorize Midwest Bonding Inc. to charge my Credit/Debit Card.
(Name as appears on card)

Card # _____

CVV # _____ Expiration Date _____

A NON-REFUNDABLE BOND PREMIUM in the amount of \$ _____.

A **REFUNDABLE COLLATERAL **(SEE BELOW) deposit in the amount of \$ _____.

The charges are for a bail bond executed on _____ in _____ (County), _____
(State) on behalf of _____ (Defendant).

I _____ understand and acknowledge that by signing below I am agreeing to Indemnify and hold Midwest Bonding Inc., harmless for all chargebacks that could occur from the above credit card transaction that would not be honored by my credit card company. I further agree to reimburse Midwest Bonding Inc. for any legal and/or collection costs that could be incurred as a result of a charge back.

I _____ understand that I must contact Midwest Bonding Inc., **within thirty (30) days of the case closure, dismissal or sentencing for return of Collateral. If Collateral is not claimed within thirty (30) days, the amount of the Collateral is considered forfeited, and shall become the property of Midwest Bonding Inc. Sentencing order, or proof of case completion is required for Collateral return, and Collateral will be returned to the original payment method only.

I FULLY AND COMPLETELY UNDERSTAND AND AGREE TO ALL OF THE ABOVE.

Signed this _____ of _____, 20____.

Signature of Cardholder _____

Printed name of Cardholder _____

Billing address for Credit/Debit Card _____

Executing Agent's Signature _____

Card Authorization # _____

Power # _____

Bond Date _____

Amount _____