

AFFIDAVIT OF UNDERTAKING OF BAIL

DRAFT

For

SURRENDER OF DEFENDANT

Pursuant to Penal Code Section 1300 (a) (1)

I, _____, declare that I am a California Bail Licensee doing business as _____, Bail License # _____.
The following information represents a true and correct statement of facts as they pertain to the bail bonds posted on _____, 20 _____.

Defendant Name: _____

Date of Birth: _____

Court: _____

Bond: _____ CASE # _____

Bond Amount: \$ _____ Charge: _____

SURETY: LEXINGTON NATIONAL INSURANCE CORP
P.O. BOX 6098
LUTHERVILLE, MD 21094
410-625-0800

Bail Bond
Agency: _____

Person (s) authorized to apprehend and surrender Defendant: _____

I declare under Penalty of Perjury that the foregoing is true and correct.

Signature

Date

Printed Name