

Authorization Code:
NO: _____
AVS: _____
CVD: _____

**CREDIT CARD AUTHORIZATION**

I, \_\_\_\_\_, authorize \_\_\_\_\_ to charge my credit card (described below) for the bail bond and/or collateral/premium/fee amount of \$\_\_\_\_\_ on behalf of Defendant \_\_\_\_\_. I fully understand that the premium/fees and merchant charges are earned in full and nonrefundable. I understand and agree that any Collateral or Bail monies deposited are to be held until this office receives the Court's bond refund and/or official Order of Exoneration; additionally all premium/fees as stipulated in the Bail Bond Indemnity Agreement and/or Conditions of Release & Call in Procedures must be paid in full. Return of any funds will be made via check; we will not credit your card. Maximum refund upon exoneration: \$\_\_\_\_\_.

Bail	\$ _____
Collateral	\$ _____
Premium	\$ _____
Fees	\$ _____
Other	\$ _____
Merchant	\$ _____
\$ _____	Total Charged on Card

**CREDIT CARD:**                      M/C    VISA    DISCOVER    AMEX  
(CHECK ONE)

CREDIT CARD NO: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_;

EXPIRATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_;                      CCV NO: \_\_\_\_\_ (3-DIGIT CODE ON BACK OF CARD);  
MM / YY

FULL NAME AS IT APPEARS ON THE CARD: \_\_\_\_\_;

BILLING STATEMENT ADDRESS: \_\_\_\_\_  
(STREET)  
 \_\_\_\_\_,  
(CITY)    (STATE)    (ZIP CODE)

TELEPHONE NO: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_;                      (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_;  
(HOME/CELL)    (WORK)

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_; DRIVER'S LICENSE NO: \_\_\_\_\_ STATE: \_\_\_\_\_;  
(MM / DD / YYYY)

I, \_\_\_\_\_, **WILL NOT DISPUTE THIS CREDIT CARD TRANSACTION. I REALIZE BY SIGNING THIS DOCUMENT AND FAXING OR EMAILING IT TO \_\_\_\_\_ THAT IT BECOMES A LEGAL AND BINDING CONTRACT. I AGREE THAT MY FAXED OR EMAILED SIGNATURE SHALL CONSTITUTE AN ORIGINAL AND I AM BOUND HEREBY.**

CARD HOLDER'S SIGNATURE: \_\_\_\_\_; DATE \_\_\_\_/\_\_\_\_/\_\_\_\_;  
(MM / DD / YYYY)

<p><b>PLEASE ATTACH THE FOLLOWING DOCUMENTS FOR VERIFICATION</b></p> <ol style="list-style-type: none"> <li>1. A copy of the front and back of the above described credit card.</li> <li>2. A copy of the card holder's photo ID (Driver's License / Passport).</li> </ol> <p>Once completed, please Fax or Scan/Email this form and the other required documents to:          _____; Fax: <b>928-522-0152</b> or <b>888-522-7880</b>; Email: _____</p> <p align="center">*Your Credit Card statement will show charges made by Tallini's Legal Services*</p>
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