



AARON J. MCALISTER
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 • FAIRFIELD, CA 94533
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**AUTHORIZATION TO CHARGE CREDIT CARD
 FOR THE PAYMENT OF A BAIL BOND PREMIUM,
 RENEWAL OF BAIL BOND PREMIUM OF FORFEITURE**

The undersigned, having made application for (or renewal of) a surety, or bail bond(s), to be issued by Aaron J. McAlister, DBA California Bail Bonds, a California licensed bail agent, hereby authorizes California Bail Bonds, its employees, agents or representatives to charge the bail bond premium/renewal in the sum of:

_____ U.S. Dollars
 \$ _____

The authorization information below shall be held on file in strict confidence. The credit card may be checked for validity before issuance of the bail bond(s). The card number below may be used to pay the premium when it becomes due. As long as the bail bond obligation undertaken by California Bail Bonds is in force, this authorization will remain in full force and effect until such time as the bond obligation referred to herein is fully exonerated or discharged.

The undersigned agrees to authorize California Bail Bonds to submit credit card charges using the credit card listed below to recover all payments due and all other unpaid amounts for the payment of premiums, premium renewals or forfeitures.

----- PRINT CLEARLY -----

Security Code: _____ Card Type: MasterCard ® VISA ® Amex ® Discover ®

Name on Card: _____

Card Number: _____ Expiration: _____

Billing Address: _____

Billing City: _____ State: _____ Zip: _____

I hereby declare that I am the holder of the above credit card and I authorize its use to pay premium(s), renewals or forfeitures for Bail bonds provided by California Bail Bonds. I also understand that this credit card may be charged for any future invoice for any and all costs associated with this/these bail bond(s).

This authorization becomes null and void following the payment of any and all obligations and the exoneration of all bail bonds underwritten by California Bail Bonds pertaining to the above named defendant.

Cardholder's Signature: _____ Date: _____

If this authorization is to be returned by FAX, please fax back to (707) 422-0417