

**Credit Card Approval Form** (please print clearly)

Upon completion and with the cardholder's signature, this form becomes an authorization to charge the cardholder for the Bail Bond premium plus any applicable charges. If the Bail Bond is forfeited and / or the defendant fails to appear in court, cardholder authorizes charges in the amount of the face amount of said Bail Bond, plus any costs as stated on the Bail Bond Application, addendums, or attachments to the Bail Bond Application.

Defendant: \_\_\_\_\_

Name of Cardholder (as shown on card) : \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

Address of Card Holder (if different than above) : \_\_\_\_\_

City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (H): \_\_\_\_\_ Telephone (C): \_\_\_\_\_

E-mail: \_\_\_\_\_

Card Type: \_\_\_\_\_ Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ PIN \_\_\_\_\_ *Authorization Code* : \_\_\_\_\_  
*(for office use)*

Full amount to be charged on card: \$ \_\_\_\_\_ US Dollars

The above charges will be shown on your credit card statement under:

**Christine Bail Bonds, LLC PO Box 24 Bradley, MI 49311**

I hereby authorize the above amount to be debited from my credit card.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PROMISSORY NOTE AND DISCLOSURE STATEMENT**

FOR VALUE RECEIVED, the undersigned jointly and severally promise to pay to the order of Christine's Bail Bonds, LLC of P.O. Box 24 Bradley, MI 49311 the sum of (\$\_\_\_\_\_)

In \_\_\_\_ consecutive payments of (\$\_\_\_\_\_) each beginning from the date hereof and thereafter, according to the frequency of payments until paid in full.

The annual percent rate shall be 24.99%. In the event the undersigned defaults on any payment according to the below stated, it is understood that this will be considered a breach of contract and therefore the full amount shall become due immediately and the defendant shall surrender him or herself to Christine's Bail Bonds, LLC and/or any if it's agents within 24 hours of non-payment. If a payment is not made on said due date a late fee of \$35.00 shall be imposed and subsequent late fees of \$5.00 per day. Late payments must be approved by Christine's Bail Bonds to avoid breach of contract.

Amount Financed: \$ \_\_\_\_\_

Total of Payments: \$ \_\_\_\_\_

Payment Due Dates	Amount
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____
9. _____	\$ _____
10. _____	\$ _____
11. _____	\$ _____
12. _____	\$ _____

\_\_\_\_\_  
Signature (Defendant)

\_\_\_\_\_  
Signature (Indemnitor)