			OWNER	DEPAR
STATE OF ARKANSAS COUNTY OF CITY OF CASE NUMBER	NAME ADDR CITY, S	<b>APPENDIX B</b> NAME OF COMPANY ADDRESS OF COMPANY CITY, STATE, ZIP CODE (AREA CODE) PHONE NUMBER		
Item 5 – defendant offense(s) of		referred to as the Defendar		XX
and having been admitted to bail in the				
Now <u>NAME OF COMPANY</u> doe	es hereby undertake that the Defendar	nt will appear before the Court	designated below at the ti	me indicated and shall at all
imes ender himself amenable to the orders and p fails to perform any of these conditions, we §	process of said court in prosecution o will pay and forfeit to the	court of		tion thereof. If the Defendant, the sum of
In Witness Whereof I have here	punto set my hand and seal this	· · ·	, 20	
Defendant to Appear In:		Address:_		
District Court, City of		City, State	e, Zip:	
District Court, County of		Phone:		
AtA.M./P.M. on, 20		Surety: <u>NAME OF COMPANY</u>		
	County Circuit Co	urt	Attorney-In-Fact (agent	;)
On NOTICE TERM		ffidavit of Sole Proprietorship	) <u> </u>	
Authority for: Item I	Item 2 Not valid for Bond in excess of \$ Isas	Item 3 Not valid If used after	Item 4 Date Issued	Power <u>Number</u> XX00001
DEFENDANT:	I			Insert Bond Amount Void if Not Completed
SOCIAL SECURIT	SOCIAL SECURITY #: DATE OF BIRTH			\$
TATE OF ARKANSAS		OLE PROPRIETORSHIP:		
	ETOR being duly	v sworn upon oath, deposes and	affirms as follows:	
That I am a resident of the State of Arkansa and	as. That I am the proprietor of	NAME OF COMPANY	, a Pro	fessional Bail Bond Company
hat such Company will operate in this Stat	e solely as a proprietorship, and that	I am responsible for the acts, lia	abilities, and operations of	f said company.

Name