ALLIANCE BAIL BONDS

Credit Card Non-Dispute

I, _____, authorize Alliance Bail Bonds to charge the below referenced credit card in the amount of _____.

Credit Card: _____

Expiration: _____ Sec. Digits: _____

Name: _____

Address: _____

_____

Defendant: _____

Amount: _____

Authorizing Number: _____

I have used this Debit/Credit card for bonding the above defendant with Alliance Bail Bonds. I understand that the defendants' failure to comply with the terms and conditions of bond may result in additional charges, in the event this should happen; I authorize the charges to be amended accordingly.

_____ _____

Card Holder Date

State of _____)
) ss.
County of _____)

On this day, _____, before me personally appeared _____, to me known to be the person described in and who executed the foregoing instrument and (s)he thereupon acknowledged to me the (s)he executed the same.

_____

Notary Public

My Commission Expires _____