

RECEIPT and STATEMENT BALANCE OF CHARGES

United States Fire Insurance Company
11490 Westheimer Rd., Suite 300, Houston, TX 77077
P.O. Box 2807 • Houston, Texas 77252-2807
(713) 954-8100 • FAX (713) 954-8389

CONTROL NO. _____

DATE _____

Received from:

NAME _____

ADDRESS _____

Expenses (itemized in detail, such as Guard Fees, Recording Fees, Notary Fees, Long
Distance Calls, Telegrams, Travel and other actual, unusual expenses)

POWER NUMBER	
Previous Balance	\$ _____
Premium	\$ _____
Misc. Charges	\$ _____
Total Charges	\$ _____
Received on Acct.	\$ _____
Balance	\$ _____

MEMORANDUM OF BAIL BOND FURNISHED (MUST BE COMPLETED)

DEFENDANT _____ D.O.B. _____

APPEARANCE DATE _____ TIME _____ COURT _____ CITY _____

CASE NO. _____ CHARGES _____ BOND AMOUNT \$ _____

POSTED FOR _____ DATE EXECUTED _____ STATE EXECUTED _____

REWRITE BOND NO. _____ ORIGINAL AMOUNT \$ _____ Received Copy of Above Receipt _____

EXECUTING AGENT SIGNATURE _____ INDEMNITOR SIGNATURE _____