

IN THE _____ COURT OF THE THIRTEENTH JUDICIAL CIRCUIT
 IN AND FOR HILLSBOROUGH COUNTY, FLORIDA
 CRIMINAL DIVISION

STATE OF FLORIDA

CASE NO.: _____

vs.

DIVISION: _____

DEFENDANT _____

BOND POWER NUMBER(S):

_____,
 BOND COMPANY, AND BAIL BOND
 AGENT,

Defendants.

_____/

APPLICATION FOR CLERK'S DISCHARGE OF BOND FORFEITURE(S)
 [Section 903.26(8), Florida Statutes]

1. The bail bond agent posted the following bond(s) for the above-named defendant:

<u>Charge</u>	<u>Amount</u>	<u>Power Number</u>
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

2. The defendant failed to appear in court on _____, 20__.

3. The forfeiture(s) should be discharged because (check all that apply):

On _____, 20__, the defendant was apprehended or surrendered in Hillsborough County. A copy of admissible evidence of the defendant's apprehension or surrender is attached hereto as Exhibit "_____."

On _____, 20__, the defendant was apprehended or surrendered in _____ (county or state). The defendant posted a new bond for this case. A copy of admissible evidence of the defendant's apprehension or surrender, and release on a new bond is attached as Exhibit "_____."

On _____, 20__, the defendant was apprehended or surrendered in _____ (county or state), and was returned to Hillsborough County on _____, 20__. A copy of admissible evidence of the defendant's apprehension or surrender, and return to Hillsborough County is attached as Exhibit "_____."

Costs in the amount of \$ _____ to reimburse the Hillsborough County Sheriff's Office for the expenses incurred in this matter were paid. A copy of the redacted receipt of payment is attached as Exhibit "_____."

4. This Application is made within sixty (60) days of the defendant's failure to appear in court pursuant to section 903.26(8), Florida Statutes.

5. A Final Judgment has not been entered on the forfeiture(s) in this case.

6. Accompanying this Application is the statutory fee pursuant to section 938.01(1), Florida Statutes (\$3.00 per forfeited bond power).

Under penalties of perjury, I declare that the facts stated herein are true and correct.

Petitioner/Bail Bond Agent Date

Petitioner/Bail Bond Agent (print) Bail Bond Agency
Address: _____
City, State, Zip: _____
Telephone: _____
Email: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of physical presence or online
notarization, this _____ day of _____, 20____, by
_____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of
notary or clerk.]

Personally known OR Produced identification
Type of identification produced _____.