

**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.

_____ /

MOTION TO DISCHARGE BOND FORFEITURE(S) BEFORE JUDGMENT
[Section 903.26(5)(a) or (b), Florida Statutes]

Petitioner, _____, through the undersigned attorney, moves this court to discharge the forfeiture(s) in this matter pursuant to section 903.26(5)(a) or (b), Florida Statutes, and as grounds therefore alleges:

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. That on _____, 20____, the defendant failed to appear, and this court forfeited said bond(s) on _____, 20____. A copy of the Notice(s) of Forfeiture is/are attached as Exhibit “_____.”

3. The forfeiture(s) should be discharged because:

A. Under section 903.26(5)(a), Florida Statutes:

It was impossible for the defendant to appear on the scheduled court date as required, or within 60 days after the date of the required appearance, due to circumstances beyond the defendant's control, as set forth below:

B. Under section 903.26(5)(b), Florida Statutes (check one):

I. The defendant's confinement occurred:

On _____, 20____, which was at the time of the required appearance; or

- On _____, 20____, which was within ____ days after the date of the required appearance.
- II. The forfeiture should be discharged because:
 - On _____, 20____, the defendant was confined in _____ (an institution or hospital). HIPAA-compliant documentation verifying the period of confinement is attached as Exhibit “_____.”
 - On _____, 20____, the defendant was confined to _____ (a county/state/federal immigration detention facility)(select one). Proper documentation from the detention facility is attached as Exhibit “_____.”
 - The defendant was deported on _____, 20____. Verification of deportation from the detention facility is attached as Exhibit “_____.”
 - The defendant died on _____, 20____. Redacted documentation sufficient to verify the defendant’s death is attached as Exhibit “_____.”

4. That this motion is filed within sixty (60) days after the notice of forfeiture was mailed or electronically transmitted.

WHEREFORE, Petitioner requests that this court grant said motion, and discharge the Order of Forfeiture, subject to the payment of state and local assessments authorized by sections 938.01(1) and 943.25, Florida Statutes, and any costs to the State, Sheriff, and Clerk recoverable in accordance with chapter 903.

Dated: _____

 Attorney Signature
 Printed Name: _____
 Florida Bar Number: _____
 Address: _____
 City, State, Zip: _____
 Telephone: _____
 Email: _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that the foregoing document has been furnished by mail or through the e-filing portal by e-service to the State Attorney's Office at service@hillsboroughsao.gov, 419 N. Pierce Street, Tampa, Florida 33602, and the Clerk's Attorney at legalbailbonds@hillsclerk.com, Attention: Clerk's Legal Department, P.O. Box 3360, Tampa, Florida 33601, on this the ____ day of _____, 20 ____.

Attorney Signature