

FINANCIAL CASUALTY & SURETY, INC.

The Bail Insurance Company (fcs)
P. O. Box 4479, Houston, Texas 77210-4479
877.737.2245 • Fax 713.351.8401

CERTIFICATE OF DISCHARGE

OF BOND

POWER NO. _____

BOND AMT. \$ _____

This is to certify that on or about the _____ day of _____, _____ I examined the records of _____ Court/Case No. _____ and found that the bond with the corresponding power number above has been discharged of record by reason of the following disposition: Pled Guilty Found Guilty

Case Dismissed Forfeiture Paid Other _____

Date of Discharge _____ Person rendering decision _____

Witness my hand and official seal this _____ day of _____, _____ .

By _____

Title _____

TO THE CLERK OF THE COURT

Will you please check your records for the bond listed above.
When the bond has been exonerated, please enter the date of
Exoneration/discharge, sign and return this form to:

FINANCIAL CASUALTY & SURETY, INC.

ATTENTION: Bail Department

P. O. Box 4479
Houston, TX 77210-4479

FCS-127 (06/02)

Bond Amount \$ _____

Appearance Date _____

Defendant _____

Court _____

City _____

State _____

Offense _____

If rewrite, original Power # _____

Executing Agent _____

Agent # _____

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