A AABBOTT&CATHY BAIL BONDS

1101 S. Andrews Ave.

Fort Lauderdale, FL 33316 bondmeout@aol.com OR bondmeout1@gmail.com

(954) 463-6363 Fax (954) 463-2109

Credit Card Authorization by Phone/Fax/Email

Date of Bond	
Defendant Name	
Bond Amount	
Power No.(s)	
Description of Charges	
Court County	

CAPD HOLDER INFORMATION ONLY

Name on Credit Card				
Address:				
Driver's License No.				
Date of Birth				
Telephone No.				
Fax No.				

Card Type	
Credit Card No.	
Expiration Date	
3 Digit Verification Code	

	CHA	RGE	DET	AILS
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PREMIUM:	COLLATERAL:	3.8% CREDIT CARD FEE
\$	\$	\$
MISC FEE:\$	TOTAL CHARGE: \$	

Effective July 1, 2002 pursuant to 648.571(3)(b)(1)(2); A bail bond agent may charge the fee imposed in connection with the use of a credit card for payment of collateral if the fee is clearly shown on the required collateral receipt and is acknowledged by the person tendering the credit card. The prevailing schedule of credit card fees must be conspicuously posted in the lobby of the bail bond agency and a copy of the fee schedule must be provided to the person tendering the credit card. The rate of 3.5% is deducted from the collateral posted on each transaction executed in the office and a rate of 3.8% on each transaction executed over the phone.

Cardholder's Signature Date

Print Cardholder's Name_____

Card Holder's Email: _____