

**COSIGNER (INDEMNITOR) / RELEASE AGREEMENT**

File No.: \_\_\_\_\_

THIS DOCUMENT IS NON-RETRACTABLE AND BINDING

Defendant's Name: \_\_\_\_\_ Date Effective: \_\_\_\_\_

**STATEMENT OF THE COSIGNER (INDEMNITOR)**

**WHEREFORE**, should the Defendant named above fail to go to court each and every time as required, I, by my signature below, do understand that I will be required to pay any and all expenses in the returning the Defendant to Court, plus the entire amount of the bond forfeiture and any court and transfer costs or fees that are required for ALL BONDS for the above named defendant. Furthermore, I do understand that my signature also ensures payment of fees set forth in the Contract to Obtain Bail for the above named Defendant and agree to make any payments missed by the Defendant as scheduled. ACE IN THE HOLE or RELIABLE BAIL BONDS and any representative thereof from this date forth has been given my permission to release any and all information deemed necessary to contact myself or return the Defendant into custody. **I UNDERSTAND THAT THIS AGREEMENT IS NON NEGOTIABLE AND THAT I AM BOUND UNTIL THE DEFENDANT IS RETURNED TO CUSTODY AND THE LIABILITY HAS BEEN RETURNED TO THE SURETY AND ALL CIVIL CASES ARE SATISFIED.** FURTHERMORE, I GRANT PERMISSION FOR DETAILED MESSAGES TO BE LEFT in (but not limited to) the following manners: WITH CONTACTS, EMPLOYERS, OR ON VOICE MAIL RECORDERS, E-MAIL, OR SOCIAL MEDIA in regards to all aspects of this bond. I further understand that the bond(s) listed above will be made by Kenneth Michael Slemmons, dba: ACE IN THE HOLE BAIL BONDS or RELIABLE BAIL BONDS.

COSIGNER (INDEMNITOR) NAME \_\_\_\_\_

Relationship to Defendant: \_\_\_\_\_ How Long Known \_\_\_\_\_

Address: \_\_\_\_\_ Length of Residence: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail Add: \_\_\_\_\_ Facebook: \_\_\_\_\_

Drivers License: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security#: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Job Title: \_\_\_\_\_ Shift: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

\_\_\_\_\_  
COSIGNER (INDEMNITOR) Date

Subscribed and sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Texas

**STATEMENT OF THE DEFENDANT**

**FURTHERMORE**, I am the above named Defendant, and by my signature below, I do affirm to the following: ACE IN THE HOLE or RELIABLE BAIL BONDS and any representative thereof from this date forth has been given my permission to release any and all information deemed necessary to contact or return myself into custody. , I GRANT PERMISSION FOR DETAILED MESSAGES TO BE LEFT in (but not limited to) the following manners: WITH CONTACTS, EMPLOYERS, OR ON VOICE MAIL RECORDERS, E-MAIL, OR SOCIAL MEDIA. I also understand that the Surety may go off of my bond at the written/verbal request of the **COSIGNER**(Indemnitor) without providing notice to me.

\_\_\_\_\_  
DEFENDANT Date

Subscribed and sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Texas