

**Lexington National
Insurance Corporation**
200 East Lexington Street Suite 501
Baltimore, MD 21202
(410) 625-0800

**AFFIDAVIT of UNDERTAKING of
BAIL for SURRENDER of DEFENDANT**
Pursuant to Penal Code Section 1300 (a) (1)

The following information represents a true and correct statement of facts as they pertain to the bail bond posted on:

Defendant's Name: _____
Last First Middle

AKA: _____ D.O.B. _____

Court: _____ Judicial District: _____

County: _____ State of California Case No.: _____

Bond Amount: \$ _____ Bond Number: _____

Original Charge(s): _____

Check One: _____ Misdemeanor _____ Felony

Surety Company: **Lexington National Insurance Corporation (410) 625-0800**
200 East Lexington Street, Suite 501
Baltimore, MD 21202

Agency: _____
Name Phone Number

_____ Address City State Zip

Person(s) authorized to apprehend and surrender Defendant: _____

I declare under penalty of perjury that the foregoing is true and correct.

I, _____, declare that I am a California bail licensee doing business

As, _____, license number _____

Affiants Signature: _____ Date: _____
Signature of Bail Licensee