

ACCURATE BAIL BONDS, INC. ®
t/a SBI BAIL BONDS

2 W. Washington Avenue, 2nd Floor, Washington, N.J. 07882
(908) 689-8770 FAX: (908) 689-8772

IN CUSTODY AFFIDAVIT/VERIFICATION

Defendant Name: _____

Incarceration Facility: _____

Facility Address: _____

Facility Telephone Number: _____

Date of Incarceration: _____ Date of Verification: _____

Current Bail Amount: _____ Current Charge: _____

Contact Name: _____

I affirm that the above information is true and accurate to the best of my knowledge. I am aware that if any of the above information is willfully false, I am subject to punishment.

Signed: _____ Date: _____

Sworn and subscribed on this _____ day of _____, 20_____

Notary Public: _____

My commission expires on: _____