

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

CERTIFICATE OF PRISONER SURRENDER

STATE OF: _____ DEFENDANT NAME: _____

CITY OF: _____ AKA'S: _____

COUNTY OF: _____ TOTAL BOND AMOUNT: _____

MUNICIPALITY: _____ CASE NUMBER(S): _____

BOND NUMBER(S): _____

ACCEPTING FACILITY NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

SBI/ACCURATE BAIL BONDS, INC., ONE OF THE SURETIES UPON THE BAIL BOND OF:
_____(DEFENDANT), HAVING DELIVERED TO ME A
CERTIFIED COPY OF THE BAIL SURRENDER OF SAID DEFENDANT, AND I, HAVING
TAKEN INTO CUSTODY, THE SAID DEFENDANT, DO HEREBY CERTIFY BY THIS
CERTIFICATE THAT _____ (RECOVERY AGENT) HAS/HAVE
SURRENDERED THE SAID DEFENDANT AND THAT THE DEFEDNANT IS NOW IN
CUSTODY THIS, _____ DAY OF _____, 20____.

ACCEPTING SIGNATURE: _____

PRINTED NAME: _____

TITLE: _____

BADGE NUMBER(S): _____