



CHULA VISTA BAIL BONDS

547 Third Ave
Chula Vista, CA 91910
Tel (619) 420-3030
Email: cvbailbonds@yahoo.com

PROMISSORY NOTE

On Demand, without a grace period, I/We, the undersigned Defendant and/or Indemnitor(s), jointly and severally, promise to pay to the order of **CHULA VISTA BAIL BONDS**, the premium balance of _____ Dollars (\$ _____); for Bail Bond #(s) _____ posted on _____, pursuant to obligations set forth in the Surety Bail Bond Agreement guaranteeing the full payment of premiums in consideration for the bail bond posted on behalf of the defendant named _____. The balance is payable in lawful money of the United States of America as outlined in the payment schedule set forth below:

PAYMENT SCHEDULE

Date: _____ Payment \$ _____ Date: _____ Payment \$ _____

Date: _____ Payment \$ _____ Date: _____ Payment \$ _____

After, any/all additional payments are completed, the undersigned promises to pay the remaining balance of \$ _____ in _____ Installments of \$ _____ each, with the first installments due as follows: _____

Or in the following manner: The amount of \$ _____ will be honored provided is paid in full as agreed. Otherwise the full amount of the premium will revert to \$ _____.

If a default in payment occurs or defendant fails to appear in court and forfeiture is issue, the premium will revert to 10% of the full amount of the bond, the entire balance becomes due and payable immediately and interest charges will accrue at 10% per annum. In the event that a suit is instituted to collect on this promissory note, or any portion thereof, the undersigned promises to pay such additional sum(s) as the court may adjudge reasonable as attorney fees and costs of instituting said suit. I/We understand that this is an application for a type of credit and I authorize review of my credit history via credit reporting agency inquiries.

I HAVE READ THE SURETY BAIL BOND AGREEMENT AND THIS PROMISSORY NOTE AND AGREE TO ALL OF THE TERMS AND CONDITIONS:

Defendant (Signature) Defendant (Agent Print) Phone # Date

Indemnitor (Signature) Indemnitor (Agent Print) Phone # Date

Indemnitor (Signature) Indemnitor (Agent Print) Phone # Date

Indemnitor (Signature) Indemnitor (Agent Print) Phone # Date