

BILL DAVIDSON BAIL BONDS

P.O Box 62
Eureka, CA 95502
(707) 441-1800 FAX (707) 442-8799

MERCHANT AGREEMENT OF CHECKING ACCOUNT

I, _____ hereby authorize Bill Davidson Bail Bonds to charge my Checking Account.

Routing # _____

Account # _____

In the amount of _____

For the purpose of posting bail bond(s) for the following defendant(s).

I agree to allow Bill Davidson Bail Bonds to charge my checking account every month in the amount of _____ until my account is paid in full.

Signature

Date

Print Name

Billing Address

Telephone #

City Zip