

APPEARANCE BOND

Case Number _____

IN THE _____ COURT OF _____, ALABAMA
(Circuit, District or Municipal) (Name of County or Municipality)

STATE OF ALABAMA

MUNICIPALITY OF _____ v. _____
Defendant

I, _____ (Defendant), as principal,
 and I (we), _____
(please print)

_____, as surety(ies), agree to pay the State of Alabama the above-named municipality the sum of \$ _____ (for municipal courts, this sum should not exceed \$1,000) and such costs as authorized by law unless the defendant appear(s) before the above-named court on _____ (date) at _____ m. (time) (if date and time are unknown, the words "the scheduled" may be placed in the date blank and a line may be placed in the space for time) and from day to day of each session thereafter until defendant is discharged by to answer to the charge of _____, or any other charge as authorized by law.

If the trial is moved to another county/municipality, this undertaking is for the appearance of the defendant from day to day of each session of the court to which the defendant is removed until discharged by law.

As sureties, we hereby jointly and severally certify that we have property valued over and above all debts and liabilities that has a fair market value equal to or greater than the amount of the above bond, and we, and each of us, waive the benefit of all laws exempting property from levy and sale under execution or other process for the collection of debt by the Constitution and laws of the State of Alabama, and we especially waive our rights to claim as exempt our wages or salary that we have under the laws of Alabama, and our rights to homestead exemptions that we have under the Constitution of Alabama and the laws of the State of Alabama, as set out in a separate writing.

Signed and sealed this date with notice that false statements are punishable as perjury.

Signature of Defendant				(L.S.)
Address (print)		City	State	Zip
Signature of Surety		Signature of Surety		
(L.S.)		(L.S.)		
Social Security Number	Telephone Number	Social Security Number	Telephone Number	
Address (print)	City	State	Zip	Address (print) City State Zip
Signature of Surety		Signature of Surety		
(L.S.)		(L.S.)		
Social Security Number	Telephone Number	Social Security Number	Telephone Number	
Address (print)	City	State	Zip	Address (print) City State Zip

Approved by: Judge/Magistrate/Any Law Enforcement Officer

Date _____

By: _____

Defendant's Information				
Date of Birth	Sex	Height	Weight	Employer
Social Security Number	Race	Hair	Eyes	Employer's Address
Driver's License Number	State	Telephone Number	Employer's Telephone Number	