

State of Alabama Unified Judicial System Form CR-11 Rev. 1/96	<h1 style="margin: 0;">APPEARANCE BOND</h1>	Case Number _____
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IN THE _____ MUNICIPAL _____ COURT OF _____ BESSEMER _____, ALABAMA
(Circuit, District, or Municipal) *(Name of Municipality or County)*

☒ STATE OF ALABAMA ☒ MUNICIPALITY OF _____ BESSEMER _____

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 _____ (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 law to answer 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. **If arrested on a Domestic Violence Charge, Assault, Sexual Abuse, Sodomy or Rape you are to have NO CONTACT, directly or indirectly with the victim, victim's family or State's witnesses.**

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

Signature of Defendant				(L.S.)
Address (Print)		State	Zip	

Signature of Surety/Agent of Professional Surety or Bail Company		Signature of Surety/Agent of Professional Surety or Bail Company		
(L.S.)		(L.S.)		
Social Security Number (Except for Agents)	Phone	Social Security Number (Except for Agents)	Phone	
Address(Print)	City	State	Zip	

Signature of Surety/Agent of Professional Surety or Bail Company		Signature of Surety/Agent of Professional Surety or Bail Company		
(L.S.)		(L.S.)		
Social Security Number (Except for Agents)	Phone	Social Security Number (Except for Agents)	Phone	
Address(Print)	City	State	Zip	

Date: _____

Approved by: Judge/Magistrate/Sheriff/Law Enforcement Officer _____

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

☐ Property Bond
 ☒ Professional Surety Bond
 ☒ Cash Bond
 Posted by _____

COURT RECORD: Original DEFENDANT: Copy SURETY: Copy