

### BAIL BOND FEE REFUND APPLICATION FORM

LICENSEE: \_\_\_\_\_

Bonding Company:

Insurance Company:

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Inmates Name:	CID#:	Receipt Date:	Receipt #:	Arrest #:	Amount:	Declined:	Prosecution Days:
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Inmates Name:	CID#:	Receipt Date:	Receipt #:	Arrest #:	Amount:	Declined:	Prosecution Days:

Questions need to be directed to the DA and/or the Auditor since that process is controlled by those offices and not the Board.  
The BBB is providing access to the info as a courtesy to the community.