



## **CREDIT CARD VOUCHER**

### **IRREVOCABLE AUTHORIZATION TO CHARGE CREDIT CARD**

Date: \_\_\_\_\_

**Defendant:** \_\_\_\_\_

I \_\_\_\_\_ authorize Port St. Lucie Bail Bonds LLC to charge my card account number \_\_\_\_\_ expiration \_\_\_\_\_ CCV \_\_\_\_\_ for bail bonds services premium \$ \_\_\_\_\_ and collateral \$ \_\_\_\_\_.

I also understand this or any other voucher will remain irrevocable and held as an open credit card voucher for any and all additional monies owed or incurred by the bail bond company during the bail bond procedure. All charges are final and will not be disputed after service has been provided. I understand that any dispute or lack of payments can result in criminal charges brought against myself. In addition, I understand any collateral charged on this account will have a 3% or higher fee deducted from the refundable amount to cover the credit card processing fee.

(Legal identification card \_\_\_\_\_)

**Sign:** \_\_\_\_\_

**Print:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

\_\_\_\_\_

**IMPORTANT:** PLEASE SEND A COPY OF DRIVER'S LICENSE AND CREDIT CARD IN ORDER TO PROCESS THE CHARGE. ALL FAXES/COPIES ARE CONSIDERED ORIGINALS. FLORIDA RESIDENTS Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.