

# PERSONAL BOND

The State of Texas  
County of Jefferson



Bond Number \_\_\_\_\_

Cause Number \_\_\_\_\_ Person ID \_\_\_\_\_

TRN \_\_\_\_\_ TRS \_\_\_\_\_ (A001, A002, A003, etc.)

Defendant's email address \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS:

I, the undersigned principal, is firmly bound unto the State of Texas in the sum shown below, on the condition that the principal, who is now in custody of the Sheriff of Jefferson County, Texas, for the offense shown below, will appear INSTANTER in all courts to which this cause may be transferred, and remain to answer the accusation at any time or place my presence may be required. I am also bound for the payment of all necessary and reasonable expenses incurred by all sheriff's and peace officers in re-arresting the principal in the event I fail to appear and returned to the Sheriff's custody, of which will be made payable to The State of Texas. This obligation becomes null and void when the principal is discharged of all legal liability for such accusation in accordance with the law.

**CHARGE:** (    ) Felony (    ) Misdemeanor NAME OF COURT \_\_\_\_\_

Offense: \_\_\_\_\_

**BOND AMOUNT:** \$ \_\_\_\_\_ **DATE** \_\_\_\_\_

Name of Principal \_\_\_\_\_

Signature of Principal \_\_\_\_\_

**FULL ADDRESS:** House Number, Street Name, City, State and Zip Code

**PHONE NUMBER:** (    ) \_\_\_\_\_ - \_\_\_\_\_

STATE ISSUED DRIVER'S LICENSE	STATE:	NUMBER:
OR		
STATE ISSUED IDENTIFICATION	STATE:	NUMBER:

DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

HEIGHT \_\_\_\_\_ feet \_\_\_\_\_ inches WEIGHT \_\_\_\_\_ lbs

COLOR OF EYES \_\_\_\_\_ COLOR OF HAIR \_\_\_\_\_

NAME OF EMPLOYER \_\_\_\_\_

\_\_\_\_\_  
Street Name, City, State

**NEAREST RELATIVE:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street Name, City, State

***I swear that I will appear before the court or magistrate upon notice by the court, or pay to the court the principal sum plus all necessary and reasonable expenses incurred in any arrest for failure to appear.***

***After ten days of releasement from custody, I acknowledge it is my responsibility to contact the court to obtain the date and time of any hearing my presence is required to attend in person.***

**Acknowledgement:** \_\_\_\_\_

Approved and Accepted by the Jefferson County Sheriff's Department

On \_\_\_\_\_ by Deputy \_\_\_\_\_

Approved 03/21/2024