

**LEXINGTON NATIONAL
INSURANCE CORPORATION**

200 East Lexington Street, Suite 501
Baltimore, Maryland 21202
Telephone: (410) 625-0800
Fax: (410) 625-0865

(PLACE BAIL AGENT'S ADDRESS STAMP HERE)

FUGITIVE BAIL BOND

NO. _____
(POWER OF ATTORNEY WITH THIS NUMBER MUST BE ATTACHED.)

IN THE MUNICIPAL COURT, _____ JUDICIAL DISTRICT,

THE PEOPLE OF THE STATE OF CALIFORNIA,
Plaintiff

Bk# _____ Cs# _____ Div. _____

VS.

Defendant

An order having been made on the _____ day of _____, 20____, by _____ a Judge of the Municipal Court of _____ Judicial District, County of _____, State of _____, that _____ be held upon a charge of being a fugitive from justice, in the County of _____, State of _____, from the State of _____ upon a charge of _____ a felony committed in the County of _____ of State of _____ upon which he/she has been admitted to bail as such fugitive to appear before said Judge of the Municipal Court, _____ Judicial District, County of _____ State of _____, on the _____ day of _____, 20____.

Now, the LEXINGTON NATIONAL INSURANCE CORPORATION, a Maryland corporation, hereby undertakes that the above-named _____, the defendant in the action pending as aforesaid, will appear and answer to the charge above mentioned, in whatever court it may be prosecuted, and will at all times hold self amenable to the orders and process of the Court and that he/she will surrender to arrest upon the warrant of the Governor of this State, or if the said defendant fails to perform either of the conditions, orders or process of the Court in the action, that we will pay to the People of the State of _____ the sum of _____ Dollars (\$ _____) lawful money of the United States in full satisfaction of this undertaking, entered into by us, as the voluntary act of each.

If the forfeiture of this bond be ordered by the court, judgment may be summarily made and entered forthwith against the said LEXINGTON NATIONAL INSURANCE CORPORATION for the amount of its undertaking herein as provided by state and federal laws.

THIS BOND IS VOID IF WRITTEN FOR AN AMOUNT GREATER THAN THE POWER OF ATTORNEY ATTACHED HERETO. IF MORE THAN ONE SUCH POWER IS ATTACHED, OR IF WRITTEN AFTER THE EXPIRATION DATE AS SPECIFIED ON THE ATTACHED POWER OF ATTORNEY.

LEXINGTON NATIONAL INSURANCE CORP.
a Maryland corporation

BY: _____
Attorney-In-Fact

I certify under penalty of perjury that I am a licensed bail agent of the LEXINGTON NATIONAL INSURANCE CORPORATION, a Maryland corporation and that I am executing this bond on _____ (DATE)
at _____ (LOCATION)

(SIGNATURE OF LICENSED AGENT)

THE PREMIUM CHARGED FOR THIS BOND PER ANNUM IS \$ _____

APPROVED THIS _____ DAY OF _____, _____ (TITLE)

NOTE: This is an Appearance Bond and cannot be construed as a guarantee for failure to provide payments, back alimony payments, FINES or Wage Law claims, nor can it be used as a Bond on Appeal.