

LEXINGTON NATIONAL
INSURANCE CORPORATION
P.O. Box 6098
Lutherville, Maryland 21094
Telephone: 410-625-0800
Facsimile: 410-625-0865

(PLACE BAIL AGENT'S ADDRESS STAMP HERE)

UNITED STATES DISTRICT COURT

FOR THE _____ DISTRICT OF _____

UNITED STATES OF AMERICA,
Plaintiff,
vs.

Magistrate Docket #

Criminal No.

Defendant

**SURETY BOND FOR PRELIMINARY
AND/OR COURT APPEARANCE OF DEFENDANT**

The above named defendant having been charged with violation(s) of Title _____, United States Code Section(s) _____, and bail having been set in the sum of \$ _____ herein.

We, the undersigned, jointly and severally acknowledge that we and our personal representatives are bound to the United States of America on this appearance bond in the sum of _____ Dollars (\$ _____), subject to the conditions below.

The conditions of this bond are that the above defendant is to appear on _____, 20____, at ____ m. before a United States Magistrate/Judge for the above named court, and at such other places as the defendant may be required to appear in the above referenced case as may be ordered by a Magistrate or by the cognizant United States District Court or any other United States District Court to which the defendant may be removed or the case transferred. It is agreed and understood that this a continuing bond guaranteeing defendant's appearance in court when required, through and including sentencing should same occur.

If the defendant appears at all times as ordered then this bond is to be void and exonerated, but if the defendant fails to appear in court or at such other places as may be ordered by the court, forfeiture of the bond may be declared by any United States District Court having cognizance of the above entitled matter at the time of or after such nonappearance. If this bond is forfeited, and the forfeiture is not set aside or remitted, judgment may be entered upon motion in such United States District Court against each debtor jointly and severally for the above stated amount together with interest and costs, and execution may be issued and payment secured as provided by the Federal Rules of Criminal Procedure and by other laws of the United States.

This bond form must be accompanied by a Power of Attorney of the Lexington National Insurance Corporation, which must reflect a power amount minimally the sum of this undertaking. The terms and conditions appearing on said power of attorney are incorporated herein by this reference.

This bond is executed this _____ day of _____, 20____, at ____ m.

BOND APPROVED, DEFENDANT ORDERED RELEASED
DATE:

U.S. DISTRICT JUDGE/MAGISTRATE

Signature of surety acknowledged before me
this _____ day of _____, 20____.

Signature of Defendant

Address of Defendant

DEPUTY CLERK

City, State & Zip Code

LEXINGTON NATIONAL INSURANCE CORPORATION

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Telephone

Attorney-in-Fact