

**GOLD COUNTRY BAIL BONDS  
163 PLACERVILLE DRIVE  
P.O. BOX 406  
PLACERVILLE, CA 95667  
530-622-6500**

**PAYMENT AGREEMENT**

Def. Name \_\_\_\_\_ Date \_\_\_\_\_ Bond # \_\_\_\_\_

Amt. Of Def. Bail \$ \_\_\_\_\_ Bond Premium Charged \$ \_\_\_\_\_

Amount Paid Down \$ \_\_\_\_\_ Balance Due \$ \_\_\_\_\_

I/We agree to pay **GOLD COUNTRY BAIL BONDS** the balance due for bail bonds premium for the above named defendant.

Payments of \$ \_\_\_\_\_ will begin on or before \_\_\_\_\_

Payments will be made:

- Weekly     Semi-Monthly     Monthly     One Time Payment

Additional lump sum payment \_\_\_\_\_

**WARNING:** In the event that payment is not made when due and the bill is turned over to a collection agency, the collection fee will be added to the delinquent balance, not to exceed 30% of the balance, and you will be responsible for that additional fee.

THE VENUE FOR ANY LITIGATION  
IS EL DORADO COUNTY, CA

Def. Signature \_\_\_\_\_ Printed \_\_\_\_\_ Date \_\_\_\_\_

Co-Signer Signature \_\_\_\_\_ Printed \_\_\_\_\_ Date \_\_\_\_\_

Co-Signer Signature \_\_\_\_\_ Printed \_\_\_\_\_ Date \_\_\_\_\_