

Arkansas Public Defender Commission

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Little Rock, Arkansas 72201
(501) 682-9070
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Professional Bail Bond Company Public Defender Fee (Act 1778 of 2003 & Act 1956 of 2005) Annual Report Form

Company Name: _____

Reporting Period: from _____ to _____

Instructions: Act 1778 of 2003 and Act 1956 of 2005 requires bail bond companies to assess and collect a non-refundable ten dollar (\$10.00) fee for the Arkansas Public Defender Commission on each and every bail and appearance bond issued by the company. Effective **August 12, 2005 this amount changed to \$20.00** on every bail and appearance bond issued by the company. These Acts also require an annual *report to be filed by February 15th each year*. Quarterly reports and amounts are still due by January 15th. Any balance due for unpaid fees (line 10 below) should accompany this report. Please send fees and report to the Arkansas Public Defender Commission at the address listed above.

Reporting Period:

January-March 20 _____

1 Total number of bonds originally reported written 01/01/2013 thru 3/31/2013 _____

2 Additional bonds written this period – not originally reported (if any) _____

April-June 20 _____

3 Total number of bonds originally reported written 04/01/2013 thru 06/30/2013 _____

4 Additional bonds written this period – not originally reported (if any) _____

July-September 20 _____

5 Total number of bonds originally reported written 7/1/2013 thru 09/30/2013 _____

6 Additional bonds written this period – not originally reported (if any) _____

October-December 20 _____

7 Total number of bonds originally reported written 10/01/2013 thru 12/31/2013 _____

8 Additional bonds written this period – not originally reported (if any) _____

Total number of Bonds written this year (total of lines 1-8) _____

9 Amount of Fees paid to Public Defender Commission this year – 2013 _____

10 Balance Due for bonds previously not reported (enclose check with report) _____

Total Fees Due Public Defender Commission this year – 2013 _____

AFFIDAVIT

I, the undersigned, do hereby swear or affirm under penalty of perjury that the information submitted above is true and accurate to the best of my knowledge.

AUTHORIZED SIGNATURE

COMPANY & TITLE

DATE

Subscribed and sworn or affirmed before me on this _____ day of _____, 20____.

STATE OF ARKANSAS

COUNTY OF _____

NOTARY PUBLIC SIGNATURE

COMMISSION EXPIRATION DATE