

Seneca Insurance Company, Inc.
 160 Water Street, 16th Floor
 New York, NY 10038
 (212) 344-3000

RECEIPT FOR COLLATERAL DEPOSITED

435145

This _____ day of _____ 20 _____

received of _____
Name of Depositor Address

as security for the execution of Bail Bond written in the sum of \$ _____
 on behalf of defendant _____ the following
 described collateral _____

NAME

Said Collateral is deposited as security for the payment of any sums which may become due to the Agency or the "Surety" by the terms of the Bail Bond Agreement executed by the said Defendant and Indemnitors, all of the terms of which are made a part of his/her receipt by this reference.

Above conditions are agreed to:

SIGNATURE OF DEPOSITOR _____ DATE _____

ADDRESS _____

SIGNATURE OF DEPOSITOR _____ DATE _____

ADDRESS _____

RECEIPT FOR RETURN OF COLLATERAL

RETURNED BY _____ DATE _____

DEPOSITOR _____

DEPOSITOR _____

TO RELEASE COLLATERAL YOU MUST OBTAIN A BAIL BOND DISCHARGE FROM THE COURT HAVING FINAL JURISDICTION.

- THIS IS NOT A NEGOTIABLE INSTRUMENT -

RECEIPT AND STATEMENT OF CHARGES

NAME AND ADDRESS OF BAIL BOND AGENT

WALLY JACOBSEN BAIL BONDS

1014 HOPPER AVE. #614
 SANTA ROSA, CA 95403

TELEPHONE # 707-542-4336

LIC. # 1841437

BY (Print Name) _____

SIGNATURE _____

RECEIVED OF: _____

NAME Kari Binggeli

ADDRESS 1045 Solano Avenue

Santa Rosa CA 95476

Expenses (Itemize in detail, such as Guard Fees, Recording Fees, Notary Fees, Long Distance Calls, Telegrams, Travel and other actual, unusual expenses.)

NA 08:01 61-50-11

Wally Jacobsen Bail Bonds

POWER NUMBER	51601925876
Date	10-17-2012
\$ 500.00	BAIL BOND PREMIUM
\$ 0.00	MISC. CHARGES
\$ 500.00	TOTAL CHARGES
\$ 500.00	RECEIVED ON ACCOUNT
\$ 0.00	BALANCE

WAS COLLATERAL TAKEN?
 IF YES, USE COLLATERAL RECEIPT.

YES NO

MEMORANDUM OF BAIL BOND FURNISHED

Jonathan Michael Ullman \$ 5000.00 10-17-12
 DEFENDANT AMOUNT OF BOND DATE

2352(a)UC, 23152(b)UC
 CHARGES

San Jose Superior Court #2 Santa Rosa
 CASE NO. COURT CITY

10-17-12 10:30am
 DATE RELEASED DATE TO APPEAR TIME

SIGNATURE _____

RECEIVED COPY OF ABOVE RECEIPT AND MEMO (SIGNATURE OF DEFENDANT OR DEPOSITOR)

[Redacted Signature]

