

**LA PAZ COUNTY JUSTICE COURT**  
**1105 ARIZONA AVENUE**  
**PARKER, AZ 85344**  
**PH: (928) 669-2504**  
**Email: parkerjustice@courts.az.gov**

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**SIGNATURE MUST BE NOTARIZED IF MAILED**

Name of Bond Poster: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Name of Defendant: \_\_\_\_\_  
Charge and /or Case Number: \_\_\_\_\_  
Receipt # Bond Poster Received: \_\_\_\_\_ Date Bond Posted: \_\_\_\_\_

I consent to allow the above bond to:

- ☐ I do consent to allow the bond to be used for the above purposes.
- ☐ Pay for the monetary obligations owed on this case.
- ☐ Pay for the monetary obligations owed on this case and other cases this defendant may have in this court.
- ☐ Be refunded to:  
Name (s): \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- ☐ Other identifying information (such as SSN, DOB): \_\_\_\_\_

When I post bond, I am guaranteeing the defendant will appear in court at the required time and date. The bond will be returned to the bond poster if the defendant complies with all conditions of release. I understand that the bond may be forfeited and not returned to me if the defendant fails to appear and / or comply with all the conditions of release.

\_\_\_\_\_  
Signature of Bond Poster

\_\_\_\_\_  
Date

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**FOR COURT USE ONLY**

Method of Payment: \_\_\_\_\_

Bond Amount Posted: \_\_\_\_\_

Bond Book # (if applicable): \_\_\_\_\_ Verified signature of bond poster: [ ] Yes [ ] No

Clerk Name / Number: \_\_\_\_\_