

ACTIVITY REPORT FOR _____ (Bond Co) License # _____

****Failure to submit timely reports is a violation of the Local Rules and may subject Licensee to disciplinary action as authorized by the TX Occ Code**

Month/Year _____

Please fill out reports completely, listing all bond activity from the first to the last day of the reported month. Include dollar amount of felonies, number of felonies, dollar amount of misdemeanors, number of misdemeanors, number of JP bonds and number of Municipal bonds; these should appear separately (you don't have to list JP and Municipal bonds individually on a separate page). These figures are to be notated at the bottom of the first page of the Activity Sheet. If you have a second, third or fourth page, please be sure to put the GRAND TOTAL ON THE FIRST PAGE. Use DISPOSED BOND page for dismissed cases, and surrendered cases only. Use Bond Forfeiture/Judgment page for all bond forfeitures and judgments issued during the month. Indicate the dollar amount of judgments paid on felonies and misdemeanors, as well as court cost amounts on felonies and misdemeanors. ALL ACTIVITY REPORTS MUST BE COMPLETE. Otherwise, report WILL NOT be accepted. Reports must be submitted to the Bail Bond Office no later than 12:00 noon on the 3rd day of each month for the prior month. If the 3rd day falls on a weekend or holiday, you must submit your report on the next business day. If you have not written any bonds, write NO ACTIVITY on your "bonds written" report. Failure to submit activity reports by the required time shall result in a temporary suspension of your license for a time period to be determined by the Burnet County Bail Bond Board.

| Date of Bond | Name of Defendant (Last, First) | Cause/Bond No | Bond Amount | Offense Charged With | Fel | Misd | Collateral Held |
|--------------|---------------------------------|---------------|-------------|----------------------|-----|------|-----------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Total # _____

Total Amount Paid on Fel Judgments \$ _____
 Total Amount Paid on Misd Judgments \$ _____
 Total Amount Paid on Fel Court Costs \$ _____
 Total Amount Paid on Misd Court Costs \$ _____

Total Number of JP Bonds _____
 Total Number of Municipal Bonds _____

I, _____, licensee for the above bonding company do hereby state the above information is true and correct.

Signature _____

Date _____

Additional Bonds Written

| Date of Bond | Name of Defendant (Last, First) | Cause/Bond No | Bond Amount | Offense Charged With | Fel | Misd | Collateral Held |
|--------------|---------------------------------|---------------|-------------|----------------------|-----|------|-----------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Disposed Bonds

| Disposition Date | Name of Defendant (Last, First) | Cause/Bond No | Bond Amount | Charge | Fel | Misd | Surrender Date/Reason |
|------------------|---------------------------------|---------------|-------------|--------|-----|------|-----------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

I, _____, licensee for the above bonding company do hereby state the above information is true and correct.

Signature _____

Date _____

Bond Forfeitures/Judgments Issued and/or Paid

| Date Issued | Name of Defendant (Last, First) | Cause/Bond No | Bond Amount | Charge | Fel | Misd | Case Status (O/C) | Judgment Amt Paid | Court Costs Amt Paid |
|-------------|---------------------------------|---------------|-------------|--------|-----|------|----------------------|----------------------|-------------------------|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

I, _____, licensee for the above bonding company do hereby state the above information is true and correct.

Signature _____

Date _____