

WARREN COUNTY COURT
APPLICATION FOR BOND REFUND/RETURN

****The application must be accompanied by the bond depositor's photo ID.****

STATE OF OHIO vs.

CASE NO. _____

DEFENDANT'S NAME

I, _____ affirm that I posted bond for the above named defendant on _____ in the amount of \$ _____. (Amount available after fees: \$ _____.) I make application for refund/return of the bond for the following reason:

- On _____ sentence was imposed pursuant to a guilty finding.
- On _____ an entry of dismissal, nolle or not guilty was entered.
- On _____ a Court ORDER was filed for full or partial bond return.
- Other: _____.
- Apply to defendant's fines/costs. Any remaining amount to be refunded.

Refund/Return to be made payable to: _____

Address to mail refund/return: _____

Phone number required: _____

This application will be processed within 14 working days and mailed to the address indicated above. If you have any further questions, please call 513-695-1370.

Date: _____

Signature

Receipt of bond posting attached. Rec'd by: _____

Bond release denied at this time.

Date

JUDGE – WARREN COUNTY COURT

***Information concerning Bonds posted in the Warren County Court:**

All 10% Bonds that are posted, incur a 10% cost that is taken from the Bond posted.

All Bonds posted, incur a \$25.00 Bail Surcharge for the State of Ohio that is taken from the Bond posted.