



CLERK OF COURTS, HAMILTON COUNTY, OHIO

LOST BOND RECEIPT AFFIDAVIT

CASE NO. _____

RECEIPT NO. _____

I, _____,
(YOUR NAME)

DO HEREBY CERTIFY THAT ON _____
(DATE BOND WAS POSTED)

I POSTED BOND IN THE AMOUNT OF \$ _____
FOR _____
(DEFENDANT)

AND SINCE THAT TIME I HAVE LOST MY RECEIPT FOR SAID BOND.

_____, SURETY

SWORN TO BEFORE ME AND SIGNED IN MY PRESENCE

THIS _____ DAY OF _____, 20 ____,

_____, NOTARY PUBLIC

HAVE THIS LOST BOND RECEIPT AFFIDAVIT NOTARIZED

**PAY A \$2.00 PROCESSING FEE IN THE COURTHOUSE
ROOM 315, PAPER ROOM**

**BAIL REFUND
MONDAY – FRIDAY, 8:00 A.M. – 3:30 P.M. ONLY
1000 Main Street, Room 315**