



South Carolina Department of Insurance
1201 Main Street Suite 1000
Columbia, SC 29201

Mailing Address
P.O. Box 100105
Columbia, SC 29202

Professional Bondsman Monthly Bond Report

Name: _____	Business Telephone: _____
Business Address: _____	
Email Address: _____	
County: _____	
Period: _____ - _____	

This report must be furnished to the Clerk of Court of the Professional Bondsman's primary place of business and any other county where the bondsman is doing business.

I am registered with the clerk of court in the following counties (check all that apply):

- | | | | | |
|-------------------------------------|--------------------------------------|---------------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Abbeville | <input type="checkbox"/> Aiken | <input type="checkbox"/> Allendale | <input type="checkbox"/> Anderson | <input type="checkbox"/> Bamberg |
| <input type="checkbox"/> Barnwell | <input type="checkbox"/> Beaufort | <input type="checkbox"/> Berkeley | <input type="checkbox"/> Calhoun | <input type="checkbox"/> Charleston |
| <input type="checkbox"/> Cherokee | <input type="checkbox"/> Chester | <input type="checkbox"/> Chesterfield | <input type="checkbox"/> Clarendon | <input type="checkbox"/> Colleton |
| <input type="checkbox"/> Darlington | <input type="checkbox"/> Dillon | <input type="checkbox"/> Dorchester | <input type="checkbox"/> Edgefield | <input type="checkbox"/> Fairfield |
| <input type="checkbox"/> Florence | <input type="checkbox"/> Georgetown | <input type="checkbox"/> Greenville | <input type="checkbox"/> Greenwood | <input type="checkbox"/> Hampton |
| <input type="checkbox"/> Horry | <input type="checkbox"/> Jasper | <input type="checkbox"/> Kershaw | <input type="checkbox"/> Lancaster | <input type="checkbox"/> Lauren |
| <input type="checkbox"/> Lee | <input type="checkbox"/> Lexington | <input type="checkbox"/> Marion | <input type="checkbox"/> Marlboro | <input type="checkbox"/> McCormick |
| <input type="checkbox"/> Newberry | <input type="checkbox"/> Oconee | <input type="checkbox"/> Orangeburg | <input type="checkbox"/> Pickens | <input type="checkbox"/> Richland |
| <input type="checkbox"/> Saluda | <input type="checkbox"/> Spartanburg | <input type="checkbox"/> Sumter | <input type="checkbox"/> Union | <input type="checkbox"/> Williamsburg |
| <input type="checkbox"/> York | | | | |

Affidavit

I, _____, (_____) being first duly sworn, state that this report is
Name License Number

a complete, true and correct statement of my activities as a professional bondsman for the past thirty day period and accurately reflects all bonds written by me. This report is being submitted in accordance with South Carolina Code Law 38-53-310.

I understand that any false, incomplete, or deceptive representation herein constitutes good and sufficient cause for revocation of my bondsman license and any other license(s) issued by the SC DOI.

I authorize any person to disclose to the South Carolina Department of Insurance any information regarding bail bonds written by me and collateral accepted by me.

I warrant that my security deposit is sufficient to cover all bonds written (magistrate, municipal, state, and federal courts) by me - and that any collateral I have posted as security is not encumbered.

Subscribed and sworn to me this _____	(Day)
day of _____	_____
(Month)	(Year)
(Notary Public Signature)	
My commission expires _____	

Summary	
1. Total Security Deposit with Home Clerk (max amount per bond (50% of item 1))	\$ _____
2. Total Max Limit Available (Four times item 1)	\$ _____
3. Total Amount of all Pending Bonds	\$ _____
4. Minimum Amount that must be in Item 1 (Item 3 divided by four)	\$ _____
5. Total Number of New Bonds Written Since the last Monthly Report	_____

Full Name of Person for whom such Professional Bondsman posted Surety	The Date and Amount of Bond posted by Professional Bondsman		Name & Location of Court in which Bond was Posted	Fee Charged for each Bond	Collateral / Security received from Principal or Persons acting on behalf of such Principal on each Bond	Warrant Number for each Bond Posted
	Date	Amount				
Totals for this Page		\$		\$		

Total Bond Amount Written This Month _____ Total Fees Charged This Month _____