

Lee County Clerk of Court Affidavit of Certification for Cash Bond Redemption

Date: _____

Depositor Name: _____

Depositor Address: _____

Depositor Phone Number: (____) _____

Defendant Name: _____

Amount of Claim: \$ _____ Bond Receipt Number: _____

I swear and affirm that I am the rightful claimant to said cash bond.

Depositor Signature

Date of Claim

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or audio-video communication technology, this _____ day of _____ 20_____, by _____ who is personally known to me or produced _____ as identification.

(SEAL)

Signature of Notary Public

Printed Name of Notary Public

My Commission Expires: _____

Mail the original signed and notarized form to the following address:

Lee County Clerk of Circuit Court

Attn: Cash Bond Claim

P.O. Box 2396

Ft. Myers, FL 33902-2396