

PROXY APPLICATION FOR DEFENDANT

(TO BE COMPLETED BY INDEMNITOR)

FILL IN DEFENDANT'S TRUE NAME _____ AKA/NICK NAME _____

TO BEST OF KNOWLEDGE HOME PHONE: _____ CELL PHONE: _____

HOME ADDRESS: _____ APT# _____ COMPLEXNAME _____

EMPLOYER: _____ ADDRESS: _____ PHONE: _____

DEFENDANTS AGE/BIRTHDAY: _____ HOW LONG KNOWN _____

HOW DO YOU KNOW THE DEFENDANT: _____

WHAT KIND OF CAR DOSE THE DEFENDANT HAVE MAKE/MODLE _____

_____ COLOR _____

DEFENDANTS GIRLFRIEND/BOYFRIEND/SPOUSES NAME AND PHONE.

_____ PHONE# _____

EMPLOYER _____

I UNDERSTAND UNDER PENILTY OF PURJURY THIS APPLICATION IS FILLED OUT TO THE BEST OF MY ABILITY..

X PRINT NAME _____ DATE _____

X SIGNITURE _____ DATE _____