Alabama Professional Bail Bonding Board Complaint Form

COMPLAINING PARTY

Mailing Address		
City	State	Zip Code
Phone	Email	
Physical Address:		
City	State	Zip Code
OR COMPANY SUBJECT TO CO	OMPLAINT	
Name		
Company		
Address		
City	State	Zip Code
Phone		
Bondsman Involved		
Occurrence date(s)		
Explain below the facts of you documentation you have rega	•	Also please attach copies of ar
Narrative		

(Page 2) Cont.	
Attach additional sheets if ne perjury, and notarized.	ecessary. The affidavit below must be signed by you, under penalty of
	AFFIDAVIT
	y swear or affirm, under penalty of perjury, that the facts of my complaint documentation in support thereof, are true and accurate to the best of m
Signature	
3.6	
Send completed form to:	Keith E. Warren
	Executive Director
	Alabama Professional Bail Bonding Board 2777 Zelda Road Montgomery AL 36106

September 2022