



# SONOMA COUNTY CENTRAL COLLECTIONS

585 Fiscal Drive, #100F P.O. BOX 3569 SANTA ROSA, CA 95402-3569  
PHONE (707) 565-2817

Date:

Name:

Address:

St & Zip:

RE: Account # :

Principal Balance : \$

Dear

Pursuant to our conversation we are writing to confirm the following agreement:

Monthly Payment Amount : \$

Payment Due Date : day of each Month starting

Please make payments payable to: County of Sonoma  
P.O. Box 3569  
Santa Rosa CA 95402-3569

Always reference your account number on all payments and correspondence. Please notify us of any address change.

The debtor agrees to make payment regardless of receipt of monthly statements. Should default be made in payment of any installments when due, the whole sum of principal shall become immediately due at the option of the holder of this note. Principal payable in lawful money of the United States. If default action is instituted on this note, I promise to pay such sum as the Court may fix as attorney's fees.

I/We agree to the above:

\_\_\_\_\_  
Signature & date

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Soc. Sec. Number

\_\_\_\_\_  
Signature & date

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Soc. Sec. Number