



MISSOURI DEPARTMENT OF COMMERCE AND INSURANCE
ACKNOWLEDGEMENT OF ASSIGNMENT

P.O. BOX 690
 JEFFERSON CITY, MO 65102-0690
 TELEPHONE: (573) 751-3518

NAME OF GENERAL BAIL BOND APPLICANT

The undersigned bank acknowledges the above Assignment in the amount of Ten Thousand Dollars (\$10,000.00)/Twenty Five Thousand Dollars (\$25,000.00) and the interest of the State of Missouri in the deposit to which the Assignment refers. **(Please circle amount.)** The amount on deposit is now _____ Dollars (\$_____). The undersigned bank knows of no other claim against the account.

Account Certificate No. _____

DATE	BANK NAME		
BANK LEGAL AND MAILING ADDRESS			TELEPHONE NUMBER
BY (SIGNATURE)	TITLE		

RELEASE OF ASSIGNMENT

Please take notice that the State of Missouri hereby releases and relinquishes all its right, title and interest in the account of _____ evidenced by account, passbook, certificate number(s) of your bank.

DIRECTOR, MISSOURI DEPARTMENT OF COMMERCE AND INSURANCE (SIGNATURE)	DATE
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