

ASSIGNMENT

In consideration of the Certificate of Deposit required under Ark. Code Ann. §17-19-205,
I hereby assign to the Arkansas Professional Bail Bond Company and Professional Bail
Bondsman Licensing Board all my rights, title and interests in the certificate of deposit
herein described to qualify _____ for bail bond
license. Certificate of Deposit number _____ in the amount of _____.
Issued by _____ with a maturity
date of _____.

Witness my hand this ____ day of _____, 20__.

Owner of Certificate

Subscribed and sworn to before me
this _____ day of _____, 20__.

Notary Public

My commission expires _____

City of _____, County of _____

State of Arkansas