

From: \_\_\_\_\_

TO: Arkansas Professional Bail Bond Company and  
Professional Bail Bondsman Licensing Board

This is to certify that the following certificate of deposit is pledged solely for the purpose of satisfying the certificate of deposit requirements of the Arkansas Professional Bail Bond Company and Professional Bail Bondsman Licensing Board pursuant to Ark. Code Ann. §17-19-205. Further, this certificate is not pledged or hypothecated, nor in the future will be pledged or hypothecated, for any other purpose.

CERTIFICATE OF DEPOSIT

Issuing Arkansas Bank: \_\_\_\_\_

Amount: \_\_\_\_\_

Certificate Number: \_\_\_\_\_

Interest Rate: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Due Date: \_\_\_\_\_

\_\_\_\_\_  
Bank Officer (Issuing Bank)

\_\_\_\_\_  
Owner of Certificate

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**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