AGENT'S REPORT

Insurance Company

Please receipt	I report execut on the attache	ion of the following bonds and atta d copy for my file.	ach hereto check	and / or cash i	n settlement t	hereof.
STATE:						
					(Agent)	
REPORTING	DATE:				(Surety)	
		<u> </u>		1		<u> </u>
Date	Power #	Defendant	Amount	Rewrite #	Inc./Dec.	Gross Prem.
		Liability \$ _				
Recd. Y N Date:		Premium \$				
Premium		BUF			_	