STATE OF ARKANSAS)
)SS
COUNTY OF)



AGENT TRANSFER AFFIDAVIT

	Comes now,		, and being duly sworn does
hereb	y state:		
	I was an Agent for		(Company)
	and have resigned or have beer	terminated	INITIALS
	2. I have returned and/or account	ed for all bond form	s and Powers of Attorney issued
	to me by the Company	INITIALS	
	3. I have returned and/or accounted for all physical property issued to me by the		
	Companyinitials		
	4. I have paid to the Company all f	ees collected, for th	e bonds I've written.
	5. I have paid to the Company all p	premiums that I have	e collected and are owed the
	Companyinitials		
	6. I have transferred all property t	hat I held in a fiducia	ary capacity to the Company.
	I understand that by signing below,	I may be subject to	a fine and/or suspension or
termii	nation of my agent license if any of th	ie above statements	s are found by the Board to be
<u>untru</u>	<u> </u>		
	Printed Name		Signature
	Before me, the undersigned Notary	Public, on this	day of,
201	_ came	who, being duly	sworn, executed the foregoing
Affida	vit.		
NAV Co	ommission Expires:		Notary
iviy CC	, , , , , , , , , , , , , , , , , , ,		