STATE OF ARKANSAS	JUSAS DEPARTMEN
)SS STATE OF ARKANSAS)	Trop of the second seco
AGENT'S	LOST LICENSE AFFIDAVIT
Come now,	, and being duly sworn does
hereby state:	
l,	, am an Arkansas licensed bail bond agent. I work
for	and my bail bond
license number is	
I hereby request that my agent license for the year	, be re-issued.
I swear and affirm that the license that was originally issue	ed to me by the Arkansas Professional Bail Bondsman Licensing Board was
lost and that I am no longer in possession of that bail bon	nd license.
l understand that there is a ten dollar (\$10.00) fee, payabl	e by company check or money order, for the replacement license.
Printed Name	Signature
Before me, the undersigned Notary Public, o	n this day of
201 came	who, being duly sworn, executed the foregoing Affidavit.
My Commission Expires:	
	Notary