

**ASSIGNMENT OF SAVINGS ACCOUNT/
CERTIFICATE OF DEPOSIT**

CRUM & FORSTER INDEMNITY COMPANY
10350 Richmond Ave., Suite 300 • Houston, TX 77042
P.O. Box 2807 • Houston, Texas 77252-2807
(713) 954-8100 • (713) 954-8389 Fax

KNOW ALL PERSONS BY THESE PRESENTS: For value received, and as collateral security on a bail bond or bail bonds described as follows:

DEFENDANT: _____ BOND AMOUNT: _____

CASE NUMBER: _____ COURT: _____

the undersigned hereby assigns, transfers and conveys unto CRUM & FORSTER INDEMNITY COMPANY
its _____ No. _____ in

to the extent of \$ _____ of said account, and as further evidence thereof there is being

delivered contemporaneously herewith the original _____
of the undersigned in said Depository together with a duly executed withdrawal order for the said amount hereinabove assigned. The Depository is hereby ordered to pay the entire proceeds of said account to **CRUM & FORSTER INDEMNITY COMPANY** upon its demand, and the undersigned hereby waives any and all right of recourse against the Depository in connection with any such payment.

This Assignment is executed in duplicate and it shall remain in full force and effect until the said **CRUM & FORSTER INDEMNITY COMPANY** has been fully indemnified and reimbursed for all loss, cost and expense, and until all liability has terminated, upon the bond or bonds hereinabove described. No change or termination of this Agreement shall be valid unless consented to in writing by **CRUM & FORSTER INDEMNITY COMPANY**.

Dated _____

STATE OF _____)

OWNER

COUNTY OF _____) ss.

OWNER

On this _____ day of _____, _____, before me, the undersigned, a Notary Public in and for said County and State, personally appeared _____

_____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is subscribed to this instrument, and acknowledged that he/she _____ executed it.

Notary Public

ACCEPTANCE OF NOTICE BY DEPOSITORY

The undersigned Depository acknowledges receipt of the foregoing assignment, and agrees that its rights to any offset against this account are waived, and agrees to abide by its terms, this _____ day of _____, _____, at _____ o'clock, ___ m.

Name of Depository

By: _____

Title of Officer