Lexington National Insurance Corporation Post Office Box 6098 Lutherville, Maryland 21094 (410) 625-0800

BAIL BOND NO.(POWER OF ATTORNEY WITH THIS NUMBER MUST BE ATTACHED)

IN THE	COURT OF THE	JUDICIAL DIS	TRICT COUNTY OF
		, STA	ATE OF IDAHO
THE PEOPLE OF T	THE STATE OF IDAHO		
		Case No	
	Plaintiff,		
,	VS.	Div. No	
	Defendant		
Defendant	(Name of Defendan	,,	ring No.)
having been admitte	d to bail in the sum of		ing No.)
C			
	Dollars (\$) and ordered to appear in	the above-entitled
court on	, 20,	(State õmisdemeanorö or õfelonyö)	charge(s):
(Date of	f Appearance)	(State õmisdemeanorö or õfelonyö)	
	e fails to perform either of these condition daho, the sum of	e court, and, if convicted, will appear for pronounceme ns, LEXINGTON NATIONAL INSURANCE CORPO	ORATION will pay to the
		Dollars (\$).
ATTACHED HER EXPIRATION D APPEARANCE E RELEASE OR	RETO, IF MORE THAN ONE S DATE SPECIFIED ON THE BOND AND CANNOT BE CON AS A GUARANTEE FOR F	AMOUNT GREATER THAN THE POWE UCH POWER IS ATTACHED, OR IF WRATTACHED POWER OF ATTORNE'S STRUED TO GUARANTEE ANY OTHEI AILURE TO PROVIDE PAYMENTS, THIS BOND CANNOT BE USED AS A F	ITTEN AFTER THE Y. THIS IS AN R CONDITIONS OF BACK ALIMONY
	LEXINGTON NATION	AL INSURANCE CORPORATION	
	D ₁₁	(1989)	
	By	Attorney-in-Fact	
I certify under per CORPORATION a	nalty of perjury that I am a licer and that I am executing this bond on	sed bail Agent of the LEXINGTON NATI	ONAL INSURANCE
	at		
	(Date)	(Location)	
		(Signature of Licen	used Agent)
The Premium Charg \$	ged for this Bond is	Approved this	aay of, 20