

LEXINGTON NATIONAL INSURANCE CORPORATION
AFFIDAVIT OF DISCHARGE

AGENCY NAME: _____

AGENCY OWNER NAME: _____

I, _____, being duly sworn, depose and certify that on or about _____, 20____, I examined the Court Records for the bonds listed on:

the attached report, or

Lex-Bail Batch Report ID number: _____,

and found that all of the bonds have been discharged and there are no amounts owed to the Court on the bonds.

Signed: _____

If attaching an exoneration report document, verify that the power number along with the defendant's name and bond amount are listed.