



30 SOUTH ROAD • FARMINGTON, CT 06032 • TELEPHONE: (860) 415-8400

RETURN TO: ACSTAR Insurance Company
30 South Road
Farmington, CT 06032

Please execute Bond Release as indicated below and return the original by mail and fax a copy of the executed Bond Release to ACSTAR at 860-404-5394, attention

BOND RELEASE

The undersigned by these presents, does for itself and its successors and assigns, unconditionally releases and discharges ACSTAR Insurance Company of and from all causes of action and all past and present claims and/or liability now or hereinafter arising under Bond No. _____ in the amount of \$_____ issued for _____. This release shall cause this bond to be null and void and terminate any obligation of ACSTAR Insurance Company under the bond.

In witness whereof, the undersigned has caused these presents to be signed by its duly authorized agent on the _____ day of _____, 20_____.

Witness: _____
(Please print or type name)

Obligee: _____
By: _____
(Signature)
(Please print or type name)

(Title)
Telephone No.: _____

NOTARY

STATE OF _____)
COUNTY OF _____) ss:

On this _____ day of _____ 20_____, before me personally appeared _____, who acknowledged himself to be the _____ of _____, a corporation, and that he, being authorized to do so, executed the foregoing Release for the purposes therein contained by signing the name of the corporation by himself as _____.

Notary Public: _____
My Commission Expires: _____