



Return to: Missouri Attorney General's Office
Consumer Protection Division • P.O. Box 899 • Jefferson City, MO 65102

Letter of Credit Information

AMOUNT U.S. \$ _____ LETTER OF CREDIT NO. _____ ISSUE DATE _____
MM-DD-YY

AT THE REQUEST OF / FOR ACCOUNT OF _____

DOING BUSINESS AS _____

Street _____ City _____ State _____

For the benefit of the State of Missouri, c/o Missouri Attorney General's Office, 207 W. High St., PO Box 899, Jefferson City, MO, 65102

ISSUER _____
Issuing Bank Institution (FDIC insured) Bank Routing Transit Number

Issuer Address _____ City _____ State _____ Zip _____

Issuer establishes this Irrevocable Letter of Credit in favor of the "STATE OF MISSOURI" (Beneficiary) in the amount indicated above, available by the Beneficiary's demand for payment. Demands under this Irrevocable Letter of Credit must be marked "Drawn against Irrevocable Letter of Credit number _____." Issuer undertakes to honor upon presentation.

This obligation shall be deemed automatically renewed on an annual basis for a period of not less than three (3) years from the date of this letter. This Letter of Credit will expire in full and finally three (3) years from the date of issuance.

The Issuer of this Letter of Credit hereby engages with the State of Missouri, as Beneficiary, that demands made in conformity with the terms of this Letter of Credit will be duly honored upon presentation. This Letter of Credit is non-transferable.

Verification Statement

In witness whereof, we have duly executed the foregoing this _____ day of _____, 20 _____.

Issuing bank institution (FDIC insured) _____
Issuer Name

By _____
Bank Official Signature Title Date (mm-dd-yy)

Before me personally appeared _____ who acknowledges that s/he signed the foregoing as his/her free act and deed.

I have hereunto set my hand affixed my official seal at my office in this _____ day of _____, 20 _____.

My term expires _____ SIGNATURE _____
MM-DD-YY NOTARY PUBLIC