

**DISPOSITION OF COLLATERAL**

Date: \_\_\_\_\_

Power #: \_\_\_\_\_

Bond #: \_\_\_\_\_

Defendant: \_\_\_\_\_ DOB: \_\_\_\_\_

Indemnitor(s): \_\_\_\_\_

Fees Paid in full:     Yes     No

If no, total amount paid: \$ \_\_\_\_\_, Balance due:\$ \_\_\_\_\_

Collateral sold for one or more of the following:

\_\_\_\_ Storage Fees Owed For Storage Costs

\_\_\_\_ Fugitive Recovery Monies Owed

\_\_\_\_ Forfeiture/Court Costs

\_\_\_\_ Attorney/Litigation Costs

\_\_\_\_ Additional Fees/Costs Pertaining To Collateral &/Or Forfeiture:

Specify: \_\_\_\_\_

Dates Notification sent to Depositor: Notification sent by Certified or Registered Mail and Regular mail.

Receipt #: \_\_\_\_\_

Response: \_\_\_\_\_

Sold Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Notes/Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_