BOND FOR LOST WARRANT

| On February 7, 2023 Yellowstone County i | ssued a warrant numbered 516203 to |
|---|---|
| | the amount of \$325.50 The warrant was drawn |
| | Principal now attests that the warrant |
| has been lost or destroyed, and it has underta | aken a diligent search but has been unable to recover |
| | eived payment on the claim. Therefore, Principal has |
| requested that Yellowstone County issue a d | uplicate warrant in the same sum of \$325.50 to |
| replace the lost or destroyed warrant. | |
| | |
| · | nd hold harmless Yellowstone County and its officers |
| from all loss, costs, or damages incurred as a r | |
| | and agrees to release any and all claims that principal |
| | n the future as related to payment of the above stated |
| | on entitled to receive payment under the original |
| warrant, as the lawful holder of the original war | rant, all monies received upon the duplicate warrant. |
| Further Principal agrees to hind itself, its hoirs | assigns, executors, administrators, successors and |
| | ount of the original warrant as required by M.C.A. 7-7- |
| | nforced in the event the Principal cashes both the |
| | In addition, Principal agrees to pay reasonable |
| • | es, and other costs incurred by Yellowstone County in |
| enforcing its rights under this bond. | co, and other cools mounted by renowstone county in |
| and and an action | |
| M- 0-1 | |
| Principal Signature | - |
| PO O SUITE | |
| Mailing Address for replacement check | - |
| Mailing Address for replacement check | |
| Billings, MT 59105 | |
| City, State Zip | - |
| | the same of the |
| SUBSCRIBED AND SWORN to before me on | May 24 BZ3 by Mike Ard |
| | Print Name of signer/principal(s) |
| (NOTADIAL CEAL (CTANAD) | Ka O-O |
| (NOTARIAL SEAL/STAMP) | Notary Signature |
| BAILEY ARD | Hotaly digitators |
| Notary Public for the State of Montana | [Complete the following if not part of stamp] |
| Seal Residing at BILLINGS, MT My Commission Expires | Notary public for the State of |
| May 9, 2027 | County of |
| | Residing at My Commission expires |
| | |
| APPROVED: | |
| | |
| | |
| Chair, Board of County Commissioners | Date |
| | |
| | |
| Replaced with warrant #(comple | eted by County) 4/27/23 |