

The Ohio Casualty Insurance Company

9450 Seward Rd., Fairfield, OH 45014

1 (800) 843-6446

BOND OF PERSONAL REPRESENTATIVE, GUARDIAN OR TRUSTEE INCLUDING PROCEEDS OF SALE OF REAL ESTATE STATE OF FLORIDA

IN THE CIRCUIT COURT OF _____ County, Florida
KNOW ALL MEN BY THESE PRESENTS:

That we, _____,
as Principal, and **The Ohio Casualty Insurance Company**, of Fairfield, Ohio, as Surety, are held and firmly bound unto the
HONORABLE _____, Governor of the State of Florida and his successors in office,
in the sum of _____ (\$ _____) DOLLARS
for the payment of which we bind ourselves, our heirs, executors, administrators, and assigns, jointly and severally.

Signed by us and dated _____.

THE CONDITION OF THIS BOND IS SUCH, That if, _____

_____, Principal, as Guardian of the
Personal Representative
Trustee
estate of _____, Deceased
Incompetent
Minor

shall faithfully administer said estate, account for, pay and deliver all money and property of said estate and perform all duties
connected with said ADMINISTRATION
required by law, or the order or decree of any court having jurisdiction, then this bond will be void; otherwise it shall remain in full
force and effect.

Principal

Principal

The Ohio Casualty Insurance Company

BY: _____
Attorney-in-fact

Approved this _____ day of _____,

REPORT OF BOND

No.

The Ohio Casualty Insurance Company

Agency: Bozeman Insurance Agency, Inc.
St. Petersburg

FLORIDA

09		2125
State Code		Agency Code

Principal's Name:

Full Address:

Obligee's Name:

County-Probate Division

Full Address:

Description:

OF ESTATE OF

Bond Amount: \$

Effective date:

Renewal Date:

Premium:

Renewal premium: \$

Special Commission: _____ (If regular commission, leave blank)

Authorized By:

Signed By:

Attachments:

Attached

Will Follow

Application

Copy of Bond

Remarks:

Statistical Information (Company Use Only)

Class of Bond: PROBATE

Form of Bond: S-4648

Is Bond Continuous? Yes No

If no, give exp date:

Renewal Information

Definite Term:

Term Prepaid

Annual Payment

For _____ Years

Continuous:

Annual Payment

Premium Payable

Every _____ Years

Surety Classification: 2 ___

Risk State:

Tax Town Code:

Bond Service Center Review: