

RETURN TO: OFFICE OF LIQUIDATIONS, REHABILITATIONS AND SPECIAL FUNDS

Capitol Associates Building  
901 North 7<sup>th</sup> Street  
Harrisburg, PA 17102  
717-787-6009 (phone)  
717-772-4543 (fax)

BOND RELEASE

The undersigned by these presents, does for itself and its successors and assigns, unconditionally releases and discharges **STATUTORY LIQUIDATOR FOR LINCOLN GENERAL 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 **STATUTORY LIQUIDATOR FOR LINCOLN GENERAL INSURANCE COMPANY** under this bond.

In witness whereof, the undersigned has caused these presents to be signed by it's duly authorized agent on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Obligee: \_\_\_\_\_

\_\_\_\_\_  
Witness

By: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Please print or type name

\_\_\_\_\_  
Title

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_ who acknowledged himself to be the \_\_\_\_\_ of \_\_\_\_\_, a \_\_\_\_\_ (type of business entity), and that he/she, being authorized to do so, executed the foregoing release for the purposes therein as contained by signing the name of the \_\_\_\_\_ (type of business entity) by himself/herself as \_\_\_\_\_ (title of person signing for the business entity).

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_