General Affidavit of Qualifications (Attorney-In-Fact)

IN THE _____ JUDICIAL CIRCUIT, _____ COUNTY, MISSOURI

Judge or Division:	**Case Number:**	
Affiant: (Name and Address)	Corporation/Surety: (Name and Address)	(Date File Stamp)

☐ Surety insurance provided by: _____

I, as attorney-in-fact for the above noted corporation/surety, a corporation licensed to transact the business of suretyship in the state of Missouri, being desirous from time to time of signing various bail bonds in this court during the month next following the filing of this affidavit and attached questionnaire upon my oath state that I have read and answered each of the questions and that the answers are true, and that I have made the same for the purpose of establishing my qualification to sign bonds as attorney-in-fact. I have in addition to signing and swearing to this affidavit, signed my name at the end of the attached questionnaire for the purpose of identification and to guarantee the genuineness and truthfulness of the information provided.

_____
Affiant

Subscribed and sworn to before me _____.
Date

_____
Clerk

General Affidavit Questionnaire Must be Attached