

### DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

P.O. Box 690, Jefferson City, Mo. 65102-0690

# Voluntary Surrender

File Number:

08A000778

To Whom It May Concern:

I, Simon D. Ebenstein hereby surrender my bail bond license, BB305758 to the Missouri Department of Insurance, Financial Institutions and Professional Registration.

Return to:

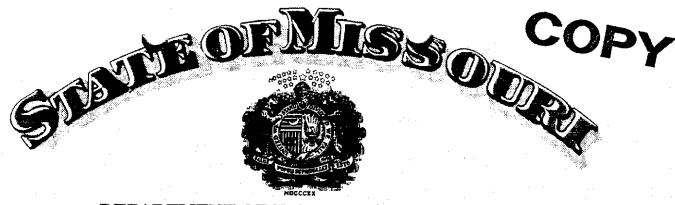
Les Hogue Department of Insurance PO Box 690 Jefferson City MO 65102

Les. Hogue@insurance.mo.gov

RECEIVED

JUL 1 3 2009

MO. DEPT OF INSURA



## DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

P.O. Box 690, Jefferson City, Mo. 65102-0690

#### BAIL BOND AGENT LICENSE

IT IS HEREBY CERTIFIED THAT

#### SIMON DAVID EBENSTEIN

IS AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE WITH THE SPECIFIC LINES SHOWN ON THE LICENSE - IF APPLICABLE

Issue Date: JAN 16, 2009

Expiration Date: SEP 28, 2009

(Wall Certificate)

EBENSTEIN, SIMON DAVID 1389 COUNTY ROAD 335 JACKSON, MO 63755-7576

(Wallet License)

MISSOURI DEPARTMENT OF INSURANCE, FIN IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN INSTITUTIONS AND PROFESSIONAL REGISTA

BAIL BOND AGENT LICENSE

IDENT. NO.:

BB305738

THIS IS TO CERTIFY THAT

EBENSTEIN, SIMON DAVID **1389 COUNTY ROAD 335** JACKSON, MO 63755-7576

ACCORDANCE WITH THE LICENSE DESCRIPTION BELOW

License Lines

Qualify Date

Bail Bond Agent

Sep 28, 2000

GB: ANTHONY GRAHAM CHILDERS PHILLIP WAYNE CHILDRESS

LICENSE PRINT DATE:

JAN 16, 2009

LICENSE EXPIRATION DATE: