



**Secretary of State**  
**Bond Affidavit for Remittance Agents**

**This space for use by  
Secretary of State.**

**Secretary of State  
Vehicle Services Department  
Dealer Services  
501 S. Second St., Rm. 069  
Springfield, IL 62756  
217-782-2942  
www.cyberdriveillinois.com**

STATE OF ILLINOIS )  
 )  
County of \_\_\_\_\_ )

I, \_\_\_\_\_ Affiant, on behalf of and as an officer of  
\_\_\_\_\_ of \_\_\_\_\_,  
Name of Institution Address

first being duly sworn, deposes and says:

1. That the affiant personally knows of his/her own knowledge that the above-named institution is chartered by the State of Illinois or the United States of America as a banking or savings and loan institution.
2. That the affiant personally knows of his/her own knowledge that the above-named institution is sufficiently bonded to meet the requirements as set forth by 625 ILCS 5/3-905.
3. That the affiant is an officer of the above-named institution and is filing this document as an inducement to cause the Secretary of State to issue a remittance agent license in the name of the institution referred to herein.
4. That the affiant is aware of the statutory requirements of 625 ILC 5/3-905 relating to the bonding requirements of remittance agents, and understands the content therein.

Further affiant sayeth not.

\_\_\_\_\_  
Affiant's Name Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Month Year

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