## ASSIGNMENT FOR CERTIFICATE OF DEPOSIT

(REVISED 0913)

FOR VALUE RECEIVED, I/We hereby assign this Certificate of Deposit unto:

## STATE OF OHIO **DIVISION OF OIL AND GAS RESOURCES MANAGEMENT**

SIGNATURE OF REGISTERED OWNER	NAME OF OWNER (PLEASE PRINT)
CERTIFICATE NUMBER	ISSUE DATE
RENEWAL TERM	MATURITY DATE
The assignment of said Certificate of Deposoffice by:	sit is Acknowledged and recorded on the books of the issuing
ISSUING BANK OR INSTITUTION	ADDRESS
9.7	ADDRESS  CITY, STATE, ZIP CODE
SIGNATURE AND TITLE OF BANK OFFICIAL	

ATTACHMENT.

**NOTE: PLEASE USE BLUE INK** 

☐ Please check this box to ensure a HOLD has been placed on this account for the Benefit of the State of Ohio, Division of Oil and Gas Resources Management.

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