



21671165

05-2013-CF-053990 XXXX-XX

POWER OF ATTORNEY

VOID IF NOT USED BY

Jul 15 2014**U.S. SPECIALTY INSURANCE COMPANY**601 S. Figueroa Street • Suite 1600
Los Angeles, CA 90017 • (310) 649-2663**Exclusive National Managing General Agent.****SURETY CORPORATION OF AMERICA**1000 NW 14th Street • Miami, Florida 33136

TOLL FREE 877-722-2245

POWER NUMBER

X6-0170891

POWER AMOUNT

\$6,000.00**FOR STATE USE ONLY****NOT VALID IN FEDERAL COURTS**

KNOW ALL MEN BY THESE PRESENTS that **U.S. Specialty Insurance Company**, a corporation duly organized and existing under the laws of the State of Texas and by the authority of the Resolution adopted by the Board of Directors by unanimous consent on May 30, 2003 which said Resolution has not been amended or rescinded, does hereby appoint and by these presents make, constitute and appoint the named Executing Agent its true and lawful Attorney-in-Fact for it and in its name, place and stead to execute, seal and deliver for and on its behalf and as its act and deed, as surety, a bail bond only. Authority of such Attorney-in-Fact is limited to appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to travel limitation, fines, restitution, payments or penalties, or any other condition imposed by a court not specifically related to court appearance.

This Power of Attorney is for use with **BAIL BONDS** only. Not valid if used in connection with Immigration Bonds. This Power is void if altered or erased or used with other powers of this Company or in conjunction with powers from any other surety company, void if used to furnish bail in excess of the stated amount of this Power and can be used only once. The obligation of the Company shall not exceed the sum of:

SIX THOUSAND DOLLARS

and provided this Power-of-Attorney is filed with the bond and retained as a part of court records. The said Attorney-in-Fact is hereby authorized to insert in this Power-of-Attorney the name of the person on whose behalf this bond was given. A separate Power-of-Attorney must be attached to each bond executed.

IN WITNESS WHEREOF, U.S. SPECIALTY INSURANCE COMPANY has caused these presents to be signed by its duly authorized officers, proper for the purpose and its corporate seal to be hereunto affixed this 16 day of

08, 2013☐ TRANSFER BOND (SCA APPROVAL REQUIRED) Liable Agent _____☐ RE-WRITE Original Power # _____ Amount _____Bond Amount \$ 5000-Defendant Rose M. HarrCharges Prisoner to Court Bail Temporarily

Charges _____

Court Court Date 13Case No 13-CF-5399City Miami County Orange State FLBy Frank M. Lanak
Frank M. Lanak, Vice PresidentBy Scott D. Anschultz
Scott D. Anschultz, Assistant Vice President

ATTORNEY-IN-FACT (Executing Agent)

[Signature][Signature]

(Print Name)

CLERK OF COURT: IF BOND FORFEITS, ATTACH A COPY OF THIS POWER TO THE FORFEITURE NOTICE AND SEND TO U.S. SPECIALTY INSURANCE COMPANY AT THE ABOVE ADDRESS AND TO THE EXECUTING AGENT AT:

MAGIC BAIL BONDS1610 Tropic Park Dr
Sanford, FL 32773

407-322-0000

It is unlawful to print or reproduce this form without the consent of U.S. Specialty Insurance Company
Designed By PSR © 2009 Surety Corporation of America, Exclusive National Managing General Agent for U.S. Specialty Insurance Company

481584

White - Court

Gold - Agent

Yellow - Insurance Company

Pink - General Agent

APPEARANCE BOND

Power No 16-0170691

STATE OF FLORIDA

Rose M. Harr (Principal)

SEND ALL COURT NOTICES TO

MAGIC BAIL BONDS

1610 Tropic Park Dr
Sanford, FL 32773

TRANSFER BOND EXECUTED BY 107-322-0000

In The
Circuit

Court

Brown

County

STATE OF FLORIDA

We, Rose M. Harr (Principal's Name), as principal and **U.S. SPECIALTY INSURANCE COMPANY**, an insurer authorized to do business in the State of Florida, as surety, are hereby held and firmly bound unto the Governor of the State of Florida and his successors in office, for the said Principal in the Sum of \$ 5000 and the said surety for a like amount, and for the payment thereof we hereby bind ourselves, our heirs, executors, administrators and assigns

The condition of this obligation is such that if the said principal shall appear on THU 20 13

or at the next Regular or Special term of the above entitled Court and shall submit to the said Court to answer a charge of

Prisoner to Commit Bail Improperly and shall submit to orders and process of said Court and not depart the same without leave, then this obligation to be void, else to remain in full force and virtue. This bond is not valid for pre-sentence investigation, pre-trial intervention or countermeasure program unless specifically authorized by surety

Signed and sealed this 16 day of Oct 20 13

X Rose M. Harr (PRINCIPAL)

By Executing Agent (Attorney-in-Fact) for
U.S. Specialty Insurance Company
601 S Figueroa Street Suite 1600 Los Angeles CA 90017 (310) 649 2663
National Managing General Agent
SURETY CORPORATION OF AMERICA
1000 NW 14th Street Miami FL 33136 • TOLL FREE 877 722 2245



TAKEN BEFORE ME AND APPROVED

Sheriff Donald Erlinger

By J. McQuinn

I, _____ am a duly licensed bail bondsman pursuant to chapter 903, Florida Statutes or a duly licensed general lines agent pursuant to Part II of chapter 626, Florida Statutes, and have registered for the current year with the Sheriff and Clerk of the Circuit Court of the aforesaid County, and have filed a certified copy of my appointment by Power of Attorney for the Surety with the office of the Sheriff and Clerk of the Circuit Court of the aforementioned County and under penalty of perjury attest

Bond Principal _____ Address _____ City _____ State _____ Zip _____

has (given or promised to give) the sum of _____ (\$ _____) Dollars as consideration for the Bail Bond issued under the Power Number set forth above and filed with the Clerk of the above Court located in the above County together with the (promise or receipt of) security belonging to

_____ (name) as follows: Indemnity Agreement: Promissory Note Mortgage & Contingent Promissory Note: Vehicle Lien: Cash/Credit Card

Other property as collateral (Detailed description) _____

and that a duly signed receipt has been given to the said Principal for the consideration given and/or that _____ (name) has (also been) given a receipt for the security described above

(Bondsman Signature) _____ Address _____ Phone _____

MAGIC BAIL BONDS

Send to
1610 Tropic Park Dr
Sanford, FL 32773

107-322-0000

CERTIFICATE OF DISCHARGE OF BOND

U.S. Specialty Insurance Company
601 S Figueroa Street Suite 1600 Los Angeles CA 90017 (310) 649 2663
National Managing General Agent
SURETY CORPORATION OF AMERICA
1000 NW 14th Street Miami FL 33136 • TOLL FREE 877 722 2245

Case Number 13-01-3399 Bond Amount 5000 Power No 16-0170691

Defendant Rose M. Harr Court Circuit Brown

This is to certify that on or about the _____ day of _____ 20 _____ I examined the court records regarding the above named Defendant and found that the bond with corresponding power number has been discharged of record by reason of the following disposition

Person rendering decision _____ Date of Discharge _____

Witness my hand and official seal this _____ day of _____ 20 _____ Signature _____ Title _____