

**ASSIGNMENT
FOR
CERTIFICATE OF DEPOSIT**

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 Deposit is Acknowledged and recorded on the books of the issuing office by:	
Issuing Bank or Institution	Address
Signature and Title of Bank Official	Telephone Number
	Date

THE ABOVE ASSIGNMENT MUST BE ON THE BACK OF ALL CERTIFICATES OF DEPOSIT OR AS AN 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.