

VOID IF NOT ISSUED BY
31-Oct-18

State or Municipal Court
POWER OF ATTORNEY
Financial Casualty & Surety, Inc.

POWER NUMBER
FCS25-1875596

3131 Eastside, Suite 600, Houston, TX 77098
FCSurety@fcsurety.com

Tele. # 877.737.2245

KNOW ALL MEN BY THESE PRESENTS that Financial Casualty & Surety, Inc., a corporation duly organized and existing under the laws of the State of Texas does constitute and appoint and by these presents does make, constitute and appoint the named 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 Federal Immigration Bonds. This power is void if altered or erased, void if used in combination with other Powers of this company or Powers from any other surety, void if used to furnish bail in excess of the maximum stated amount of this Power. This Power Number is unique and can only be used once. The obligation of the surety shall not exceed the sum of:

*****Twenty Five Thousand Dollars and Zero Cents*****

*****\$25,000.00*****

and this original Power-of-Attorney with the original bond MUST together be posted with the court and retained as a part of the court's 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.

IN WITNESS WHEREOF, FINANCIAL CASUALTY & SURETY, INC. has caused these presents to be signed by its duly authorized officer, proper for the purpose and its corporate seal to be affixed this 12 of SEPTEMBER 2017.

Day

Month

Year

Defendant ARETHA SMITH Premium Charged \$ _____

Court KENNEBETH City MPO State MN Case Number _____

Bond Amount \$ 20,000 Charge(s) ASSAULT

If Rewrite, Original Number _____

Executing Agent DAVID PERON



[Signature]
Chairman of FCS

NOT VALID IF USED IN Federal Court

Micro Printed (Anti-Forgery) Message is Contained in this Document's Border ~ If missing, the Document is FORGED and VOID

[FCS-103 (12/05)] COPY FOR COURT

MINNESOTA
JUDICIAL
BRANCH

BAIL BOND FORM – APPEARANCE ONLY (also known as FORM 702)

STATE OF MINNESOTA, Plaintiff

Court File No.: 27-CR-18-18391

v. AZSKA OSMAN, Defendant

Filed in HENNEPIN County District Court Bond Amount TWENTY THOUSAND (\$ 20000)

Charges: ROBBERY
(including amendments and lesser included charges)

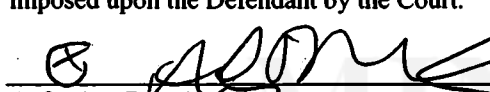
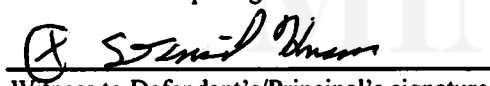
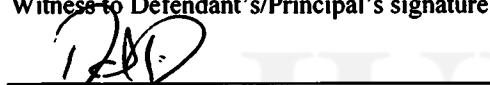
BOND OBLIGATION AND CONDITIONS

The Defendant, as Principal, AZSKA OSMAN (print name)
and Financial Casualty & Surety, Inc. as Surety, hereby agree and acknowledge that they are indebted to pay to the above named District Court the Bond Amount if the Defendant fails to personally appear in Court at such times and on such dates as specified by the Court to answer the charge(s) identified in this Bond, including any amendments of these charges or lesser included charges.

The obligation of the Surety becomes null and void upon the occurrence of any of the following events:

1. The dismissal of the charge(s) identified on this form and accompanying Bond;
2. The finding or verdict that Defendant is not guilty of the charge(s) identified on this form and accompanying Bond; or
3. The sentencing of Defendant (whether imposed or stayed) with respect to the charge(s) identified on this form and accompanying Bond.

This is an appearance bond only and does not guarantee compliance with conditional release requirements imposed upon the Defendant by the Court. This bond shall not be used for payment of any fines, surcharges, costs, or other financial obligation(s) imposed upon the Defendant by the Court.

	<u>Azskha Osman</u>	<u>12/19</u>
Defendant/Principal signature	Printed Name	Date
	<u>David Khan</u>	<u>7/12/18</u>
Witness to Defendant's/Principal's signature	Printed Name	Date
	<u>DAVID DOVEN</u>	<u>9/12/18</u>
Attorney in Fact for Surety Company (Bail Bond Agent) signature	Printed Name	Date

ACKNOWLEDGMENT OF SURETY RELATIONSHIP

This instrument remains valid for 180 days after the date signed below by the Bail Bond Agency (e.g., Owner/President/CEO).

This instrument acknowledges that the above-named Attorney in Fact, David Doven (print name)
is employed by Bail Bonds Doctor, Inc. and is authorized to post bonds on behalf of Financial Casualty & Surety, Inc.

	<u>President</u>	<u>07/31/2018</u>
Bail Bond Agency (e.g., Owner/President/CEO)	Job Title	Date