



**MISSOURI DEPARTMENT OF PUBLIC SAFETY
DIVISION OF ALCOHOL AND TOBACCO CONTROL
ASSIGNMENT OF CERTIFICATE OF
DEPOSIT-EXCISE TAX**

FORM 555	THIS FORM CANNOT BE ALTERED REQUIREMENTS FOR COMPLETING THIS FORM ARE FOLLOWING.
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LICENSEE NAME	DOING BUSINESS AS		
LICENSEE ADDRESS	CITY	STATE	ZIP

For and in consideration of the issuance of a Liquor license by the Missouri Division of Alcohol and Tobacco Control I, _____, being of lawful age, assign and transfer the Certificate of Deposit for _____ issued _____ (AMOUNT) _____ (CERTIFICATE OF DEPOSIT NUMBER) _____ (MONTH, DAY, YEAR) by _____ (NAME OF FINANCIAL INSTITUTION), of _____ (FINANCIAL INSTITUTION'S ADDRESS) as security to the Missouri Division of Alcohol and Tobacco Control in lieu of a corporate bond.

I understand that at any time a delinquency occurs, the Missouri Division of Alcohol and Tobacco Control may redeem the Certificate of Deposit assigned by this instrument and apply the proceeds to such delinquency. I agree that Section 311.555, RSMo will govern my rights and responsibilities under this agreement.

I HAVE READ THE FOREGOING AND FULLY UNDERSTAND IT AND CERTIFY THAT I AM THE LICENSEE SUBJECT TO THIS ASSIGNMENT OR I HAVE THE AUTHORITY TO EXECUTE THIS ASSIGNMENT ON BEHALF OF THE LICENSEE.

Witness my hand on _____ (MONTH, DAY, YEAR)

LICENSEE OF RECORD

LICENSEE NAME _____ (NAME OF CORPORATION, SOLE OWNER, PARTNERSHIP OR LLC)

_____, HEREBY ACKNOWLEDGES (MANAGING OFFICER, SOLE OWNER, PARTNERS) (TITLE)

AND AGREES TO HONOR THE FOREGOING ASSIGNMENT.

FINANCIAL INSTITUTION ACKNOWLEDGEMENT

PLEASE CHECK THE APPROPRIATE BOX

The paper Certificate of Deposit is attached.

The Certificate of Deposit is paperless. A withdrawal slip, confirmation of withdrawal, or endorsement on the Certificate of Deposit is not required. In the event that the licensee becomes delinquent, and the Missouri Division of Alcohol and Tobacco Control seeks the redemption of the Certificate of Deposit, a written request from the Missouri Division of Alcohol and Tobacco Control together with this Assignment is the only documentation necessary to release funds to the Missouri Division of Alcohol and Tobacco Control.

BANK	PHONE NUMBER	BY (SIGNATURE OF BANKING OFFICIAL)
BANK OFFICIAL'S NAME TYPED OR PRINTED		TITLE

NOTARY PUBLIC (BANK OFFICIAL'S NAME MUST BE NOTARIZED)

NOTARY PUBLIC EMBOSSEER OR BLACK INK RUBBER STAMP SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)
SUBSCRIBED AN SWORN BEFORE ME, THIS		USE RUBBER STAMP IN CLEAR AREA BELOW.
DAY OF	20	
NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES	
NOTARY PUBLIC NAME (TYPED OR PRINTED)		

CERTIFICATE OF DEPOSIT

The Missouri Division of Alcohol and Tobacco Control will accept a Certificate of Deposit (CD) issued by a state or federally chartered financial institution in lieu of an Excise Tax Corporate Bond subject to the provisions of Section 311.555, RSMo.

REQUIREMENTS TO COMPLETE FORM 555, ASSIGNMENT OF CERTIFICATE OF DEPOSIT

- Form 555 must be fully completed by the financial institution.
- It must be issued jointly in the name of the owner **AND** the Missouri Division of Alcohol and Tobacco Control.
- The bank official's signature must be notarized.
- Form 555 must be signed by the sole owner, managing officer or partners.
- Attach a completed signature card, if required by financial institution.

CERTIFICATE OF DEPOSIT REQUIREMENTS FOR PAPER CDS

- A paper CD must be:
 - Issued jointly in the name of the owner **AND** the Missouri Division of Alcohol and Tobacco Control.
 - A 12-month (1 year) CD; and
 - Endorsed in ink by the owner.
- If the CD is a "Book Entry" CD, a signed withdrawal slip or a letter must accompany it from the issuing financial institution which indicates how the Division of Alcohol and Tobacco Control may draw upon the CD. The sole owner, managing officer, or partners must sign the withdrawal slip.
- If the CD is paperless, check the appropriate box.

MAILING INFORMATION

The CD, Form 555, (Assignment of Certificate of Deposit, Excise Tax) and the signature card (if required by financial institution) should be mailed with the Missouri licensing application to the Missouri Division of Alcohol and Tobacco Control, P.O. Box 837, Jefferson City, MO 65102

Are you a Veteran in the state of Missouri and interested in learning more about benefits and resources available to you and your dependents?

If yes, please visit <https://mvc.dps.mo.gov/MoVeteransInformation/Survey/DPS>



MISSOURI DEPARTMENT OF PUBLIC SAFETY
DIVISION OF ALCOHOL AND TOBACCO CONTROL
RELEASE

AUTHORITY TO RELEASE THE ABOVE LISTED CERTIFICATE OF DEPOSIT IS HEREBY GRANTED ON

_____, PLEASE MAIL ANY PROCEEDS FROM THE CERTIFICATE OF DEPOSIT TO
(MONTH, DAY, YEAR)

MISSOURI DIVISION OF ALCOHOL AND TOBACCO CONTROL

BY: _____

TITLE: _____