



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

FORM  <b>555</b>	<b>THIS FORM CANNOT BE ALTERED</b>
	<b>REQUIREMENTS FOR COMPLETING          THIS FORM ARE FOLLOWING.</b>

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  
 (NAME OF MANAGING OFFICER, SOLE OWNER, PARTNERS)

\_\_\_\_\_ issued \_\_\_\_\_  
 (AMOUNT) (CERTIFICATE OF DEPOSIT NUMBER) (MONTH, DAY, YEAR)

by \_\_\_\_\_, of \_\_\_\_\_  
 (NAME OF FINANCIAL INSTITUTION) (FINANCIAL INSTITUTION'S ADDRESS)

as security to the Missouri Division of Alcohol and Tobacco Control in lieu of a corporate bond.

This Certificate of Deposit will be released two years after the initial date of assignment, provided I have maintained satisfactory tax compliance during this time and there are no outstanding excise taxes, interest, fees, penalties or additions due. 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 EMBOSSER OR BLACK INK RUBBER STAMP SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)
	SUBSCRIBED AN SWORN BEFORE ME, THIS	
	DAY OF	20
	NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES
NOTARY PUBLIC NAME (TYPED OR PRINTED)		<b>USE RUBBER STAMP IN CLEAR AREA BELOW.</b>

**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 24-month (2 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



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: \_\_\_\_\_