



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

PAYOUT / SECURITY DEPOSIT

BMV CASE NUMBER:

ACCIDENT DATE:

I hereby request the Registrar of Motor Vehicles to dispense funds deposited in accordance with Section 4509.28 of the Ohio Revised Code (R.C.) and in accordance with the Order of Security Requirement of Suspension, issued as a result of the accident on the date listed above, in accordance with the following schedule:

Amount of Money on Deposit	\$
----------------------------	----

PAY TO	\$
--------	----

ADDRESS

PAY TO	\$
--------	----

ADDRESS

Balance of Deposit	\$
--------------------	----

I hereby certify the above instructions to be in satisfaction of claims arising out of the above accident and that this instruction and agreement is submitted in compliance with Section 4509.28 of the R.C.

SIGNATURE OF DEPOSITOR X	PRINTED NAME
ADDRESS	DATE

Notary:

Sworn to and subscribed in my presence this _____ day of _____, 20____ in _____ County,
State of _____.

(Notary Seal)

Signature of Notary Public **X** _____ My commission expires _____

Mail to: Ohio Bureau of Motor Vehicles
Attn: Compliance Unit
P.O. Box 16520
Columbus OH 43216-6520