South Carolina Department of Insurance

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NIKKI R. HALEY
Governor

RAYMOND G. FARMER
Director of Insurance

POWER OF ATTORNEY-BAIL BONDSMAN RUNNER

KNOW ALL MEN BY THESE PRESENT that I, _____
(Print or Type Professional Bondsman's Name)

of _____County, South Carolina, have made, constituted and appointed, and

by these presents do make, constitute and appoint _____
(Print or Type Runner's Name)

my true and lawful Attorney-In-Fact and lawful Runner to execute bail bonds on my behalf for individuals before the State, County and Municipal Courts of those counties of the State of South Carolina in which this Power of Attorney is registered. No individual bond may be executed by such Runner.

$_____. 00 (If no limit, state "NO LIMIT")

And I do hereby ratify and confirm all things so done by my said Runner and Attorney-in-Fact, within the scope of the authority herein given him, fully and to the same extent as by me personally performed.

This Power-of -Attorney shall continue and exist in being until withdrawn by me in writing.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal this _____day of

_____, 20_____.

_____
(Professional Bondsman Signature)

Sworn to before me this
_____day of_____, 20_____.

_____
Notary Public of South Carolina
My Commission Expires:_____

Form No. BB1104