

Date: \_\_\_\_\_

Attn: Bail Bond Division  
Oklahoma Insurance Department  
3625 NW 56<sup>th</sup> Street Suite 100  
Oklahoma City OK 73112-4511

RE: Duplicate Pocket License Request

Pursuant to 59 O.S. §1305(E), I am requesting a duplicate photo pocket license.

Attached is the required Twenty-Five Dollar (\$25.00) fee.

( ) Money Order number \_\_\_\_\_

( ) Cashier's Check number \_\_\_\_\_

( ) Personal Check number \_\_\_\_\_

\_\_\_\_\_  
Bail Bondsman's Signature

\_\_\_\_\_  
License Number

\_\_\_\_\_  
Bail Bondsman's Printed Name