



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 LAND RECLAMATION PROGRAM
CONFIRMATION OF IRREVOCABLE LETTER OF CREDIT

DIRECTOR
 MISSOURI LAND RECLAMATION COMMISSION
 P.O. BOX 176
 JEFFERSON CITY, MO 65102

OUR LETTER OF CREDIT NUMBER _____
 DATE OF ISSUANCE _____

DEAR SIR,

We, the _____
NAME OF CONFIRMING BANK

of _____
ADDRESS OF CONFIRMING BANK

at the request of _____
NAME OF ISSUING BANK

of _____
ADDRESS OF ISSUING BANK

hereby confirm Irrevocable Letter of Credit No. _____ dated _____
 issued by _____
NAME OF ISSUING BANK

to you in the amount of _____ dollars, a copy which is attached hereto and incorporated by reference.

By this Confirmation we undertake to honor each demand for payment made by you under the above referenced Letter of Credit and presented to us according to its terms, up to the amount stated above. Payment of each demand shall be as specified in the above-referenced Letter of Credit. This Confirmation shall be subject to all terms, conditions, warranties and limitations in the above-referenced Letter of Credit, and this Confirmation shall terminate only under the conditions and limitations of the above-referenced Letter of Credit. When construing this Confirmation according to the terms, conditions and limitations of the above-referenced Letter of Credit, the term "this Confirmation" shall be substituted for the term "this Letter of Credit."

Correspondence concerning this Confirmation, including demands for payment, shall be addressed to us at _____.

We certify that the officer or agent signing this letter is authorized by us to execute this Confirmation of Letter of Credit on our behalf.

| CONFIRMING BANK AGENT'S SIGNATURE | | | |
|-----------------------------------|--------------|----------------|--------------------------|
| SIGNATURE | PRINTED NAME | OFFICIAL TITLE | TELEPHONE WITH AREA CODE |

| NOTARY SIGNATURE | | | |
|---|--------------------------------------|-----------------------|--------------------------------------|
| NOTARY PUBLIC EMBOSSER OR BLACK INK RUBBER STAMP SEAL | STATE OF | | COUNTY (OR CITY OF ST. LOUIS) |
| | SUBSCRIBED AND SWORN BEFORE ME, THIS | | |
| | DAY OF | YEAR | USE RUBBER STAMP IN CLEAR AREA BELOW |
| | NOTARY PUBLIC SIGNATURE | MY COMMISSION EXPIRES | |
| NOTARY PUBLIC NAME (PRINTED) | | | |

| COUNTER SIGNATURE | |
|---|----------------|
| COUNTERSIGNED – PRESIDENT OR VICE-PRESIDENT | OFFICIAL TITLE |

| NOTARY SIGNATURE | | | |
|---|--------------------------------------|-----------------------|--------------------------------------|
| NOTARY PUBLIC EMBOSSER OR BLACK INK RUBBER STAMP SEAL | STATE OF | | COUNTY (OR CITY OF ST. LOUIS) |
| | SUBSCRIBED AND SWORN BEFORE ME, THIS | | |
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