

**Authorization for Redirection of Restitution**

To: The Clerk of Court, Probation Department or Other Appropriate Official

Dear Madam or Sir:

Travelers Casualty and Surety Company of America ("Travelers") insured the City of Fort Lauderdale under an insurance policy (Policy No. 049-LB-105565006 ("Policy")). The City of Fort Lauderdale submitted a claim to Travelers under the Policy for losses resulting from the dishonesty of its former employee, Phillip Peterson. Travelers reimbursed the City of Fort Lauderdale for the loss and the City of Fort Lauderdale assigned its recovery rights, including its interest in any restitution ("Release and Assignment") to Travelers. A copy of the Release and Assignment is attached.

Phillip Peterson has been ordered to pay restitution. The City of Fort Lauderdale hereby requests and authorizes the Clerk of Court, Probation Department or other appropriate official to redirect and transmit those payments directly to Travelers, and authorizes Travelers to accept those payments on behalf of the City of Fort Lauderdale pursuant to the terms of the Release and Assignment and the Policy. Payments can be sent to Travelers at the address below:

**Travelers  
Attn: Bond and Specialty Insurance Claim Operations  
One Tower Square, S202A  
Hartford, CT 06183**

Should you have any questions or concerns, please do not hesitate to contact me. My contact information follows below.

Regards,

City of Fort Lauderdale

By: \_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Dated