County File No.:	Project Location: Owner/Applicant:
NO	TICE OF ASSIGNMENT AND ASSIGNMENT
AS SERCURITY FOR PER	FORMANCE by Assignor of the covenants and obligations set forth in an pment Improvements dated entered into between RA, State of California (County), and Assignor), whose principal place of business is
	Assignor), whose principal place of business is
assign, and set over to COUN Assignor, in and to the insure	, the undersigned does hereby NTY OF SANTA CLARA, all right, title and interest of whatever nature, of ed amount of Assignor in
avidance by an account in th	a amount of \$ account number
insurance of the account by t Insurance Corporation, and i full amount of said account a	account number, herewith. Assignor agrees that this assignment carries with it the right in the Federal Deposit Insurance Corporation or the Federal Savings and Loan includes and gives the right to County to redeem, collect and withdraw the at any time without notice to Assignor. This assignment is given as security mants and obligations set forth in the above-described Agreement.
ASSIGNOR HEREBY NOT assignment.	TFIES the above-named Bank or Savings and Loan Association of this
Date:	Assignor:
I	RECEIPT FOR NOTICE OF ASSIGNMENT
County of the account identifias shown by the above assign from this account without ex we have received no notice of	ged to the County of Santa Clara of written notice of the assignment to said fied above. We have noted in our records County's interest in said account ment and have retained a copy of this sheet. Payment shall not be made press written release of County, except as provided herein. We certify that of any lien, encumbrance, hold or claim of the above-identified account prior nty. We agree to make payment on request in accordance with the bank or able to this organization.
Data	Daula Manna
Name and Title of Bank Ren	Bank Name:oresentative:
Signature:	
RECEIPT EC	OR SECURITY AND DIRECTIONS TO PAY EARNINGS
Receipt is acknowledged of therein. The Bank or Saving	the above assignment to the County of Santa Clara, of the account identified as and Loan Association named herein is hereby authorized and directed to ve-identified account to the above-named Assignor until otherwise notified
COUNTY OF SANTA CLA STATE OF CALIFORNIA	RA DATE