STATE OF CALIFORNIA DEPARTMENT OF FISH AND GAME

Fish and Game License Sales Permit Bond

| | Bond Number | |
|---|--|--|
| | Expiration Date | |
| KNOW ALL PEOPLE BY THESE PRESENTS: | | |
| That we | | |
| as Principal and the created, organized and existing under and by virtue of the law | A corporation | |
| as Surety, are held and firmly bound to the STA | vs of the state of | |
| the sum of | ited States of America, to the payment of which, utors and successors, jointly and severally, firmly by these | |
| agent selling licenses for the California Department of Fish ar CHAPTER 3, ARTICLE 2 of the California Fish and Game Copolicies of the California Department of Fish and Game, relating California Department of Fish and Game of all amounts due of the California Department of Fish and Game for issuance and WHEREAS, demand has been made upon the princip authorized by the provisions of the said California Fish and Gordinances; NOW, THEREFORE, if the above bounden Principal seaid California Fish and Game Code, Title 14 of the California Department of Fish and Game, with respect to the deliveries, licenses occurring on or after and in particular all amounts which may become due, then this obligation shall effect. The surety hereunder may be relieved from liability to the extension of the sale of licenses of the sale of licenses. | is about to be issued a permit to engage in business as an ad Game, pursuant to the provisions of DIVISION 2, ode, Title 14 of the California Administrative Code and the ing to the accounting for return of and payment to the or all licenses delivered to the above bounden Principal by a sale; and all by the Department of Fish and Game for security, as ame Code, to insure compliance with said Law or hall well and truly comply with all the provisions of the Administrative Code and the policies of the California returns, sales, and other transactions regarding said ular render all accountings, return all unsold licenses and pay be null and void, otherwise it shall remain in full force and ent and in the manner set forth below; see for the Department of Fish and Game, or; had Game to the Surety | |
| termination. Witnessed the hand and seal of the said Principal, ar the Signature of its duly authorized Attorney-in Fact, attested day of, 20 | nd witnessed also the corporate seal of the said Surety and by its duly authorized agents at this | |
| Surety Company | (Seal) | |
| | (Seal) | |
| Address | Surety | |
| City State Zip | By | |
| Surety Agent | Telephone Number | |

FG 311 (Rev 4/1/95)

Surety Bond Application

| AGENCY NAME: | AGENCY CONTACT: | | | | | |
|---|--------------------------------|--|---------------|----------------|--|--|
| AGENCY PHONE:AGEI | | | CY EMAIL: | | | |
| AGENCY ADDRESS: | | | State: | Zip: | | |
| CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT? | | | | | | |
| NAME OF PREVIOUS SURETY COMPANY WRITING THE BOND? | | | | | | |
| SECTION I: BOND APPLIED FOR | | | | | | |
| Type of Bond:Effective Date:Expiration Date: | | | | | | |
| Type of Company CORP LLC DBA PARTNERSHIP Bond Amount: | | | | | | |
| (Obligee): | | | | | | |
| Obligee Address | | | | | | |
| SECTION II: GENERAL INFORMATION | | | | | | |
| Applicant's Name:Spouse Name: | | | | | | |
| SS#:Spouse SS | ; #: | Ho | me Phone: () | | | |
| Residence Address: | City: | St | ate: | Zip: | | |
| Business Name: | | | | | | |
| Business Phone: () | _Business Fax: (|) | E-mail: | | | |
| Business Address: | City: | St | ate: | Zip: | | |
| Date Business BEGAN under present Individual or Firm Name: BUSINESS TAX ID: | | | | | | |
| HAS ANY COMPANY REFUSED TO ISSUE BONDS DO YOU HAVE ANY LIENS, CLAIMS OR JUDGMENTS | | | | | | |
| FOR ANY PURPOSE? YES NO AGAINST YOU? YES NO HAS APPLICANT EVER FAILED IN BUSINESS? YES NO HAS APPLICANT EVER FILED BANKRUPTCY? YES NO | | | | | | |
| | | | | PICT! TES NO | | |
| IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER SECTION III: ADDITIONAL OWNERS OR PARTNERS AS REQUIRED | | | | | | |
| NAME:SPOUSE NAME: | | | | | | |
| SS#: | SPOUSE S | SS#: | PHON | E: | | |
| HOME ADDRESS: | City: | | state: | | | |
| PERSONAL FINANCIALS (IF MORE THAN ONE OWNER, EACH HAS TO FILL OUT THIS APPLICATION) | | | | | | |
| STATEMENT OF ASSETS AND LIABILITIES AS OF | | | | | | |
| ASSETS CASH IN DANK | | NOTES DAVABLE TO | LIABILITIES | <u> </u> | | |
| CASH IN BANK CASH ON HAND | | NOTES PAYABLE TO BANKS NOTES TO OTHERS (excl. of equipment) | | | | |
| STOCKS AND BONDS | | ACCOUNTS PAYABLE | | | | |
| ACCOUNTS RECEIVABLE | | FEDERAL & STATE INCOME TAX DUE | | | | |
| NOTES RECEIVABLE | | ALL OTHER TAXES | | | | |
| INVENTORY CASH VALUE LIFE INSURANCE | | ACCRUALS, PAYROLLS, ETC. | | | | |
| EQUIPMENT | | DUE ON EQUIPMENT | | | | |
| REAL ESTATE | | DUE ON REAL ESTATE | | | | |
| OTHER ASSETS | | OTHER LIABILITIES | | | | |
| | | CAPITAL STOCK (if a corporation) | | | | |
| | | SURPLUS AND UNDIVIDED PROFITS | | | | |
| TOTAL ASSETS | TOTAL ASSETS TOTAL LIADILITIES | | | | | |
| TOTAL AGGLIG | | TOTAL LIABILITIES NET WORTH | | | | |
| Name of Owners | Name and T | itle of Officers % OWNERSHIP IN COMPANY | | | | |
| | | | | | | |
| 1 | 1 | | | | | |

COMPLETION OF THIS FORM CONSTITUTES PERMISSION FOR WORLDWIDE INSURANCE SPECIALISTS INC. TO OBTAIN CONSUMER INFORMATION WHICH WILL BE USED TO DETERMINE BONDING ELIGIBILITY. THIS INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE NO PREMIUM FINANCING WILL BE ACCEPTED AS PREMIUM IS EARNED IN FULL.

Worldwide Insurance Specialists, Inc 2424 W. Missouri AVE Phoenix, AZ 85015 Toll Free: (888) 518-8011 Local (602) 749-0702 Fax: (602) 674-8235