STATE OF CALIFORNIA DEPARTMENT OF BUSINESS OVERSIGHT

BOND OF RESIDENTIAL MORTGAGE LENDER AND/OR SERVICER Financial Code Section 50205

Bond No.

	· · ·
KNOW ALL MEN BY THESE PRESENTS:	
That we,	_, as Principal, whose
address for service is:	
(Street Address, City, State and ZIP Code)	,
(Street Fidulesis, City, State and 221 Code)	
and, a corporation, created, o	organized and existing
under and by virtue of the laws of the State of	and an admitted
Surety insurer authorized to transact a general surety business in the State of	California, as Surety,
whose address for service is:	•
(Street Address, City, State and ZIP Code)	▼

are held and firmly bound unto the Commissioner of Business Oversight of the State of California, for the use thereof and for the use of any person or persons who may have a cause of action against the Principal under the provisions of the California Residential Mortgage Lending Act and all acts amendatory thereof and supplementary thereto now and hereafter enacted, in the total aggregate penal sum of Fifty Thousand Dollars (\$50,000), lawful money of the United States of America, to be paid to the Commissioner of Business Oversight of the State of California, or to any person or persons, for the use and benefit aforesaid, for which payment well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

The condition of the above obligation is such that--

WHEREAS, The above-named Principal has made application to the Commissioner of Business Oversight of the State of California for a license to engage in business under and pursuant to the provisions of the California Residential Mortgage Lending Act, and is required under the provisions of the California Residential Mortgage Lending Act to furnish a bond in the sum above named, conditioned as set forth:

NOW, THEREFORE, The Principal, and any and all agents and employees representing the

MBL 50205 (7/13)

Principal, shall faithfully conform to and abide by the provisions of the California Residential Mortgage Lending Act and all acts amendatory thereof and supplementary thereto now and hereafter enacted, and of all rules and regulations lawfully made by the Commissioner of Business Oversight of the State of California under the California Residential Mortgage Lending Act and shall honestly and faithfully apply all funds received and shall faithfully and honestly perform all obligations and undertakings under the California Residential Mortgage Lending Act, and shall pay to the Commissioner of Business Oversight of the State of California and to any person or persons, for the use and benefit aforesaid, any and all moneys which become due or owing the Commissioner of Business Oversight of the State of California or to any such person or persons from the Principal under and by virtue of the provisions of the California Residential Mortgage Lending Act.

This bond is subject to the following provisions:

- 1. That any person who sustains an injury covered by this bond may, in addition to any other remedy that he or she may have, bring an action in his or her own name upon this bond for the recovery of any damages sustained by him or her.
- 2. That the total aggregate liability of the Surety or sureties herein shall be limited to the payment of Fifty Thousand Dollars (\$50,000).
- 3. This bond may be cancelled by the Surety in accordance with the provisions of Sections 996.320 and 996.330 of the Code of Civil Procedure of the State of California.
- 4. That, in the event either the Principal and/or the Surety under this bond are served with notice of any action commenced against the Principal or the Surety under the bond, the Principal and Surety as each is served with notice of action shall respectively and, within 10 days, give written notice of the filing of such action to the Commissioner of Business Oversight of the State of California, at the Los Angeles office of the Department of Business Oversight.
- 5. That, in the event the Surety under this bond makes full or partial payment on this bond the Surety shall immediately give written notice of such full or partial payment to the Commissioner of Business Oversight of the State of California, at the Los Angeles office of the Department of Business Oversight.

6. That the effective date of	of this bond shall be
	Signature of Principal
	Typed or Printed Name of Principal

	Executed at (City and State)			
I certify (or declare) under pe an unrevoked power of Attorney. Executed in	enalty of perjury that I have executed the foregoing bond unde			
(City and State)	(Date)			
under the laws of the State of Californ	nia.			
	Signature of Attorney-in-Fact			
	for Surety			
	Printed or typed name of Attorney-in-Fact for Surety			

ALL OF THE ABOVE SIGNATURES MUST BE NOTARIZED

Bond forms change; this is for educational purposes only.

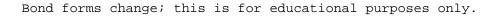
STATE OF CALIFORNIA DEPARTMENT OF BUSINESS OVERSIGHT

INSTRUCTIONS FOR COMPLETION OF SURETY BOND FORM

This form contains the approved format for the Surety Bond as required by Financial Code Section 50205. Every company is required to obtain and maintain a surety bond.

The original surety bond must be filed and must include all of the following:

- 1. The signature of the attorney-in-fact for the surety company.
- 2. A notarial jurat for the attorney-in-fact.
- 3. A power of attorney from the surety company.
- 4. Legal name of the licensee. Business name(s), if applicable, may also be included.
- 5. The signature of the licensee.
- 6. The notarial jurat for the signature of the licensee.



Surety Bond Application

AGENCY NAME:	AGENCY CONTACT:							
	AGENCY FAX:AGENCY EMAIL:							
AGENCY ADDRESS:			State:	Zip:				
CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT?								
NAME OF PREVIOUS SURETY COMPANY	WRITING THE BONI	0?						
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:								
SS#:Spouse SS	S#:	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 Individu	ual or Firm Name:		BUSINESS TAX ID:					
HAS ANY COMPANY REFUSED TO ISSUE	BONDS	DO YOU HAVE ANY						
FOR ANY PURPOSE? HAS APPLICANT EVER FAILED IN BUSINES			VED EILED BANKDLI	YES NO				
		ON A SEPERATE SHE		PICT! TES NO				
SECTION III: ADDITIONAL OWNERS			and the second					
NAME:	SPOUSE N	IAME:	•					
SS#:	SPOUSE S	SS#:	PHON	E:				
HOME ADDRESS:	City:		state:					
PERSONAL FINANCIALS (IF MORE			OUT THIS APPLICA	ATION)				
ST		TS AND LIABILITIES	AS OF	<u> </u>				
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		ACCRUALS, PAYROLLS, ETC.						
CASH VALUE LIFE INSURANCE		DUE ON FOLUDATAT						
EQUIPMENT REAL ESTATE		DUE ON EQUIPMENT DUE ON REAL ESTATE						
OTHER ASSETS		OTHER LIABILITIES						
		CAPITAL STOCK (if a corporation)						
		SURPLUS AND UNDIVIDED PROFITS						
TOTAL ASSETS		TOTAL LIABILITIES						
Name of Owners	Name and T	NET WORTH itle of Officers	% OWNERS	IIP IN COMPANY				
Nume and Title of Officers // Officeroff IN COMPANT								

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