

Delayed Deposit Services Business Bond Form Nebraska Department of Banking and Finance

NOTE: If individual, give full name and address, or if partnership, full name and address of each partner.
If corporation, give full title and the state where incorporated. Give trade name, wherever used.

KNOW ALL MEN BY THESE PRESENTS, That

_____ of _____
_____ County(ies), Nebraska, as Principal, and _____
_____ as Surety qualified to do business in Nebraska, are hereby bound in the penal
sum of _____ Dollars (\$ _____) for payment under the following conditions:

1. The Principal has applied to the Director of the Nebraska Department of Banking and Finance ("Director") for a license to transact business as a Delayed Deposit Services Business pursuant to the Delayed Deposit Services Act ("the Act"), Neb. Rev. Stat. §§ 45-901 to 45-929 (Reissue 1998, Cum. Supp. 2002).
2. The Principal, and all individuals representing the Principal, shall strictly comply with the provisions of the Act, and all rules and regulations promulgated thereunder. The Principal shall satisfy any loss or damage, suffered by the State of Nebraska or any person dealing with the Principal resulting from the Principal's violation of any provision of the Act, or a rule or regulation promulgated thereunder. The Director, or any person suffering such loss or damage, has the right to bring an action on this bond against the Principal or Surety.
3. The total aggregate liability of the Surety shall be limited to the payment of Fifty-Thousand Dollars (\$50,000) per county or _____ Dollars (\$ _____) total for all counties noted above.
4. The bond shall remain in force until released by the Director or until cancelled by the Surety.
5. The Surety may cancel this bond by filing a written notice of cancellation with the Director thirty (30) days prior to the effective date of termination.

If the Principal observes the above-listed conditions, then the obligation shall be void. The obligation will otherwise remain valid.

Bond #: _____

NOTE: Persons executing for Surety
must attach a Power of Attorney.

THIS BOND shall be effective on and after or, if left blank, the day of execution by surety shall be the effective date of the bond. The bond shall be effective, if accepted by the Nebraska Department of Banking and Finance, without further notice.

IN WITNESS WHEREOF, we have duly executed the foregoing obligation this day of , 20.

LICENSEE:

[CORPORATE SEAL]
(If Any)

(Licensee's Name)

(Signature)

(Print Signature Name)

(Title)

(Date)

Surety Must Attach Original Power of Attorney

(Surety)

[SURETY SEAL]

(Signature)

(Print Signature Name)

(Telephone Number)

(Date)

Name, address, and telephone number of the Surety Representative to contact in the event a claim must be filed: