SMALL LOAN LENDER SURETY BOND

Bond Number	Effective Date
S	STATE OF NEW HAMPSHIRE BANKING DEPARTMENT
KNOW ALL MEN BY THESE PRESENTS, that w	we
	(Name of Applicant or Licensee)
of AS Pl	PRINCIPAL, AND,
(State of Incorporation/Formation)	PRINCIPAL, AND, (Name of Insurance Company)
authorized to do business in the State of New Hamp Hampshire and the Bank Commissioner of the State citizens and residents thereof, conditions of this obl	pshire, AS SURETY, and hereby held and firmly bound unto the State of New e of New Hampshire for the use and benefit of the State of New Hampshire and the ligation, in the sum of twenty-five thousand dollars (\$25,000), lawful money of the and truly made, we bind ourselves, our heirs, executors, administrators, successors s.
SEALED WITH our seals and dated this	_day of,
THE CONDITIONS OF THE ABOVE OBLIGATI	ION ARE SUCH THAT:
Revised Statutes Annotated 399-A from and after tincluding renewal periods, or until cancelled, and re	plied for a license as a Small Loan Lender under the provisions of New Hampshire the date hereof for the license period and continuous during the licensing period, required to faithfully comply with any and all provisions of NH RSA 399-A, as now tions and orders issued or hereafter to be issued by the Bank Commissioner of the
Commissioner by rule or order requires, by any per	any person who has a cause of action under RSA 399-A and, if the Bank rson who has a cause of action not arising under the chapter. This bond provides lity on the bond unless brought within 6 years after the transaction or other act upon
cancelled. Should the Surety wish to effect cancelled be in writing and the 30 day period shall commence	force and remain in effect during the period of license of the Principal or until lation, 30 days notice must be given to the Bank Commissioner. Such notice shall e from the date the notice is received by the Bank Commissioner. The suspension of cancel, suspend nor otherwise impair any obligation of the Surety under this bond.
	by and through its duly authorized officers, has hereunto set its hand and seal and ned by its duly authorized officers and its corporate seal to be hereto affixed this
day of,,	
	(Seal) (Seal)
(Print or Type the Name of Applicant or Licensee)	(Seal) (Seal) (Print or Type the Name of Surety)
BY	BY
(Print or Type Name and Official Position)	Print or Type Name and Official Position of the Surety's Representative w/ POA)
BY	BY
(Signature) (Date)	BY(Signature) (Date)
	BY
	BY(Counter-Signature by NH licensed

NOTE: Any applicable resolutions authorizing the execution of this bond shall be attached. If this bond has been subscribed to an "attorney-in-fact", a Power of Attorney must be attached.

Representative of the Insurer)