

BOND



KNOW ALL MEN BY THESE PRESENTS, THAT WE _____ as, Principal
(Name of Principal & Agent)
of _____ County of _____, State of _____
(City or Town)

WITH HIS (THEIR) (ITS) PRINCIPAL PLACE OF BUSINESS IN PENNSYLVANIA AT _____
(Street and Number)
_____ COUNTY OF _____, AND _____
(City or Town) (Name of Surety)

A CORPORATION ORGANIZED UNDER THE LAWS OF _____, AND DULY AUTHORIZED TO
ENGAGE IN BUSINESS IN THE COMMONWEALTH OF PENNSYLVANIA, WITH ITS PRINCIPAL OFFICE THEREIN
LOCATED AT _____ IN THE CITY OF _____
AS SURETY ARE HELD AND FIRMLY BOUND UNTO THE COMMONWEALTH OF PENNSYLVANIA IN THE SUM OF
_____ DOLLARS (\$ _____) LAWFUL MONEY OF THE UNITED STATES OF
AMERICA, to be paid to the said Commonwealth of Pennsylvania, to which payment well and truly to be made, we bind
ourselves and each of us, our and each our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by
these presents.

Signed, scaled, and delivered this _____ day of _____ A.D. 20 _____.

WHEREAS, the above bounden PRINCIPAL has been designated its issuing agent by the Pennsylvania Game Commission to
issue Hunting Licenses in accordance with the Chapter 27 of the Game and Wildlife Code (34 Pa. C.S. § 2701 et. seq.); and

WHEREAS, this bond is filed with the Pennsylvania Game Commission, Commonwealth of Pennsylvania, in accordance with
said Acts of Assembly to enable said PRINCIPAL to obtain from the Pennsylvania Game Commission, the annual supply of
Licenses;

NOW, therefore, the condition of this obligation is such that if the above bounden PRINCIPAL shall well and truly, correctly
and faithfully in all things, execute, perform and discharge the trusts and duties of his office as required by law, and shall well and
truly, correctly and faithfully account for and pay according to law, all monies which shall be received by, or for him in his official
capacity, due and owing to the Commonwealth and shall faithfully comply with the provisions of the Acts referred to above of the
Commonwealth of Pennsylvania, until the revocation of the permit in connection with this bond which is being filed, unless before
that date the SURETY shall be released and discharged in the manner and to the extent prescribed by the said Act, then, this
obligation shall be void; otherwise, it shall be and remain in full force and virtue.

AND, in the event that the above bounden PRINCIPAL shall, from and after the effective date of the permit aforesaid, fail in
any respect to faithfully comply with the provisions of the Acts referred to above, we do hereby empower the Attorney General of
the Commonwealth of Pennsylvania, or any attorney of any Court of Record within the Commonwealth of Pennsylvania or
elsewhere to appear for and enter judgment against us or either of us, our or either of our heirs, executors, administrators,
successors or assigns, for the above sum with costs of suits, release of all errors and without stay of execution. And, we waive the
right of inquisition on any real estate which may be levied upon to collect the above sum, and we do hereby voluntarily relinquish
the same and authorize the prothonotary to enter upon a writ of execution our said relinquishment. And, we further agree that said
real estate may be sold on a writ of execution and hereby waive and release all relief from any and all appraisal, stay or
exemption laws of any state now in force or hereafter to be passed. And, for the entering of such judgement, this shall be the
sufficient warrant for any such attorney, and a copy of this Bond and Warrant being filed in said action, it shall not be necessary to
file the original as a warrant of attorney, any law or rule of court to the contrary notwithstanding.

In witness whereof this Instrument has been duly executed by the above-named principal and surety the day and year above
written.

(Incorporated Agent sign below)

(Name of Corporation)

Attest: _____ Secretary By _____ President

WITNESSES (Partnership Agent sign below)

(Name of Partnership) (SEAL)

(Partner) (SEAL)

(Individual Agent sign below)

(Name of Company, if any) (SEAL)

(Individual) (SEAL)

Bond forms change; this is for educational purposes only

(Name of Surety) (CORP) (SEAL)

By _____ Attest: _____
(Attorney in fact)

Received _____ day of _____, 20 _____.

IMPORTANT: Please print name underneath each written signature.

SURETY BOND APPLICATION

AGENCY NAME: _____ AGENCY CONTACT _____
 AGENCY PHONE: _____ AGENCY FAX: _____ E-MAIL: _____
 AGENCY ADDRESS: _____
(Street) (City) (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: _____ AMOUNT: _____
 OBLIGEE: _____ EFF. DATE: _____ EXP. DATE: _____
 OBLIGEE ADDRESS: _____
(Street) (City) (State) (Zip)
 BUSINESS NAME: _____
 BUSINESS PHONE: _____ BUSINESS FAX: _____ Client E-mail _____
 BUSINESS ADDRESS: _____
(Street) (City) (State) (Zip)
 TYPE OF COMPANY CORP LLC DBA PARTNERSHIP HOW MANY OWNERS? _____

DATE BUSINESS ESTABLISHED: _____ BUSINESS TAX ID: _____
 HAS ANY COMPANY REFUSED TO ISSUE BONDS FOR ANY PURPOSE? YES NO DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS AGAINST YOU? YES NO
 HAS APPLICANT EVER FAILED IN BUSINESS? YES NO HAS APPLICANT EVER FILED BANKRUPTCY? YES NO

SECTION II: GENERAL INFORMATION

OWNER'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)
 ADDITIONAL OWNERS / PARTNERS
 OWNER'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

PERSONAL FINANCIAL STATEMENT OF ASSETS & LIABILITIES AS OF _____

ASSETS		LIABILITIES	
CASH IN BANK	\$	NOTES PAYABLE TO BANKS	\$
CASH ON HAND	\$	NOTES PAYABLE TO OTHERS	\$
STOCKS & BONDS	\$	ACCOUNTS PAYABLE	\$
ACCOUNTS RECEIVABLE	\$	FEDERAL & STATE INCOME TAX DUE	\$
NOTES RECEIVABLE	\$	ALL OTHER TAXES	\$
INVENTORY	\$	ACCRUALS, PAYROLLS, ETC.	\$
CASH VALUE OF LIFE INSURANCE	\$	DUE ON EQUIPMENT	\$
EQUIPMENT	\$	DUE ON REAL ESTATE	\$
REAL ESTATE	\$	OTHER LIABILITIES	\$
OTHER ASSETS	\$	CAPITAL STOCK (IF A CORPORATION)	\$
		SURPLUS & UNDIVIDED PROFITS	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$
		NET WORTH	\$
NAME OF OWNERS	NAME & TITLE OF OFFICERS	PERCENTAGE OF OWNERSHIP	

Completion of this form constitutes permission for worldwide insurance specialists inc. to obtain consumer information which will be used to determine bonding eligibility.

Worldwide Insurance Specialists, Inc **Toll Free: (888) 518-8011**
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