

LOTTERY RETAILER NUMBER: _____

BOND NUMBER: _____

KNOW ALL MEN BY THESE PRESENTS, THAT WE, _____ of _____ as Principal(hereinafter called Principal) and, _____, a corporation organized and existing under the laws of the State of Minnesota with its Home Office in the city of _____, as Surety, (hereinafter called Surety), are held and firmly bound unto;
Minnesota State Lottery
2645 Long Lake Road
Roseville, Minnesota 55113

As obligee, in full and just sum of _____ Dollars, lawful money of the United States of America, to be paid to the said Obligee, successors or assigns, on demand for and on account of any funds due from the Principal as a result of the sale of Lottery tickets to which the Principal has failed to make timely payments to the obligee; 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 aggregate liability of the Surety hereunder on all claims whatsoever shall not exceed the penal sum of this bond in any event.

WHEREAS in accordance with Minnesota Statutes, Chapter 349A, the Principal has entered, or is about to enter into written Agreement with the Obligee to be financially responsible to the Lottery for all revenues derived from the state of Minnesota State Lottery tickets as is more specifically set forth in said Agreement, to which reference is hereby made.

NOW THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that is the Principal shall well and truly perform and carry out the covenants, terms and conditions of said Agreement, then this obligation to void; otherwise remain in full force and effect. The surety may cancel this bond by written notice to the Principal and Obligee, by Certified Mail, at least (30) days in advance of the date of cancellation.

Sealed with seals and dates this _____ day of _____.

PRINCIPAL:

X _____
WITNESS
X _____
WITNESS

BUSINESS NAME
X _____

SURETY:

X _____
ATTEST

BY: _____

ADDRESS

CITY, STATE, ZIP CODE

PHONE NUMBER

FAX NUMBER

SAMPLE
INTEGRITYBONDS.COM

INTEGRITY 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: _____ EFF.DATE: _____ EXP.DATE: _____
 TYPE OF COMPANY CORP LLC DBA PARTNERSHIP AMOUNT: _____
 OBLIGEE: _____
 OBLIGEE ADDRESS: _____
(Street) (City) (State) (Zip)

SECTION II: GENERAL INFORMATION

APPLICANT'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)
 BUSINESS NAME: _____
 BUSINESS PHONE: _____ BUSINESS FAX: _____ Client E-mail _____
 BUSINESS ADDRESS: _____
(Street) (City) (State) (Zip)
 DATE BUSINESS BEGAN UNDER CURRENT NAME: _____ 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

IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER:

SECTION III: ADDITIONAL OWNERS / PARTNERS

APPLICANT'S NAME: _____ SPOUSE NAME _____
 SS#: _____ SPOUSE SS# _____ HOME PHONE: _____
 RESIDENTIAL ADDRESS: _____
(Street) (City) (State) (Zip)

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 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.

Integrity Bonds Inc

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Local (480) 626-8916

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