



Bill Richardson
Governor

New Mexico State Athletic Commission
5200 Oakland NE, Albuquerque, NM 87113
Phone: 505-222-9860 Fax: 505-222-9865
Website: www.rld.state.nm.us

Arturo Jaramillo
Superintendent

Thomas Buckner
Deputy Superintendent

April Flores
Executive Director

Steve Abraham
Chairman NMAC

Surety Bond for Promoters of Professional Athletic Events

Bond No. _____

Know all men by these present, that we, _____

_____ as principal and the _____, a corporation organized under the laws of _____ and authorized to transact the business of surety ship in the State of New Mexico, as Surety, are held and firmly bound unto the State of New Mexico Athletic Commission, as obligee, in the just and full sum of _____ dollars (_____), for which sum, well and truly to be made, we bind ourselves, heirs, executors, administrators, successors and assigned, jointly and severally, firmly by these present. The condition of this obligation is that, if it is determined in a proceeding before the New Mexico Athletic Commission that the principal has violated a provision or provisions of the New Mexico Athletic Commission or regulations there under pertaining to the promotion of any Athletic event approved by the Athletic Commission and that such violation has resulted in monetary loss to any Participant, Official, Renter, Advertiser, employee and any debt incurred by Principal that is directly a part of such promotion including taxes imposed by the State of New Mexico, then said principal shall indemnify said State of New Mexico against this loss within thirty (30) days of said determined becoming final, then this obligation is null and void; otherwise it shall remain in full force.

Surety may at any time, cancel this bond by giving thirty (30) days written notice to the New Mexico Athletic Commission. Surety remains liable, however, for any defaults under this bond committed prior to the expiration of the thirty day period.

SIGNED, SEALED AND DATED THIS _____ day of _____, 20_____.

Principal

Surety

Bond forms change; this is for educational purposes only.

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

Toll Free: (866) 420-2613

Local (480) 626-8916

E-Mail info@integritybonds.com

Fax: (602) 674-8235