BOND NO	. •		
We,	are legally bound to War three thousand five hund representatives, admini	, a corp transact the b shington's Lo tred dollars () strators, succ	oration organized pusiness of surety as a stery, Olympia, \$3,500). We bind ressors, and assigns,
The condition of this obligation Retailer or has applied to becoming one, the Washington a security that will guarantee the RCW 67.70.040(1)(i), RCW 67.30-070. This security obligation	ome a retailer. As a control of the	dition of being the Principal e Lottery for 1 5, WAC 315-	g a retailer or provide to the Lottery ottery products. See 06-035, and WAC 315
In the event that the Principal ft 67.70.040(1)(i), WAC 315-06-0 WAC provisions, then this oblit to exist, provided however, the amount specified in this bond notice in writing to the Principal terminate, and not less than this occur only as a result of subsection.	035, and WAC 315-30-07 igation shall be void. Other than the total liability of the The bond may be cancel and to Washington's Lefty days after the notice.	O, and any are nerwise, the of Surety shall held by the Sottery, stating This termina	nendments to these obligation will continue be limited to the surety by sending when liability shall ation of liability may
	Principal		•
	Principal		
	Principal		
BY:	Attorney in Fact		···
Signed and dated this	day of	·	_•
	(month)	(year)	

INTEGRITY SURETY BOND APPLICATION

		AGENCY CONTACT				
AGENCY PHONE:	AGENCY FAX: E-MAIL:					
AGENCY ADDRESS:						
CURRENT OR EXPIRING QUOTE WE ARE	LOOVING TO PEAT?	,	(City)	(State)	(Zip)	
		-				
NAME OF PREVIOUS SURETY COMPANY	WRITING THE BONL)?				
SECTION I: BOND APPLIED FOR: TYPE OF BOND:		EFF.DATE:	EXP.DA	ΓE:		
TYPE OF COMPANY CORP LLC	DBA PARTNER					
OBLIGEE:						
OBLIGEE ADDRESS: (Street)		(City)	(State)		(7in)	
SECTION II: GENERAL INFORMATION		,	(State)		(Zip)	
APPLICANT'S NAME:		SPOUSE NAME				
SS#:SPO	USE SS#	HOI	ME PHONE:			
RESIDENTIAL ADDRESS:(Street)		(City)	(8: 1.)		(3:)	
BUSINESS NAME:		(City)	(State)		(Zip)	
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?		O YOU HAVE ANY LIE GAINST YOU?	NS, CLAIMS, OR JUDG	EMENTS	YES NO	
HAS APPLICANT EVER FAILED IN BUSINES	SS? YES 🗌 NO 🗍 H	IAS APPLICANT EVER	FILED BANKRUPTCY?	,	YES NO	
					,	
IF YES TO ANY. I	PLEASE EXPLAIN ON A	A SEPERATE SHEET C				
·		A SEPERATE SHEET C			. LO NO _	
SECTION III: ADDITIONAL OWNERS / PART	NERS	A SEPERATE SHEET O				
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:	NERS	SPOUSE NAME				
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#:SPOI	NERS	SPOUSE NAME	OF PAPER:			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME:	NERS	SPOUSE NAME	OF PAPER:		(Zip)	
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM	NERS	SPOUSE NAME HO!	ME PHONE: (State)			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS	NERS USE SS# MENT OF ASSETS & I	SPOUSE NAME HON (City) LIABILITIES AS OF LIABILITIES	ME PHONE: (State)			
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK	NERS USE SS# MENT OF ASSETS & I	SPOUSE NAME HO! (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T	ME PHONE: (State) O BANKS	\$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND	NERS USE SS# MENT OF ASSETS & I	City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T	ME PHONE: (State) GO BANKS O OTHERS	\$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS	NERS USE SS# MENT OF ASSETS & I \$ \$ \$	CCity) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T NOTES PAYABLE T ACCOUNTS PAYAB	ME PHONE: (State) O BANKS O OTHERS	\$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$	City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE	ME PHONE: (State) O BANKS O OTHERS LE INCOME TAX DUE	\$ \$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$ \$	City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES	ME PHONE: (State) O BANKS O OTHERS LE INCOME TAX DUE	\$ \$ \$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO	ME PHONE: (State) O BANKS O OTHERS LE INCOME TAX DUE	\$ \$ \$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY CASH VALUE OF LIFE INSURANCE	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO DUE ON EQUIPMEN	ME PHONE: (State) GO BANKS GO OTHERS ELE INCOME TAX DUE	\$ \$ \$ \$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#:SPOI RESIDENTIAL ADDRESS:(Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY CASH VALUE OF LIFE INSURANCE EQUIPMENT	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO DUE ON EQUIPMEN DUE ON REAL ESTA	ME PHONE: (State) O BANKS O OTHERS SLE INCOME TAX DUE DLLS, ETC. NT ATE	\$ \$ \$ \$ \$ \$ \$		
SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY CASH VALUE OF LIFE INSURANCE EQUIPMENT REAL ESTATE	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO DUE ON EQUIPMEN DUE ON REAL ESTA	ME PHONE: (State) O BANKS O OTHERS LE INCOME TAX DUE DLLS, ETC. NT ATE	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
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SECTION III: ADDITIONAL OWNERS / PART APPLICANT'S NAME: SS#: SPOI RESIDENTIAL ADDRESS: (Street) STATEM ASSETS CASH IN BANK CASH ON HAND STOCKS & BONDS ACCOUNTS RECEIVABLE NOTES RECEIVABLE INVENTORY CASH VALUE OF LIFE INSURANCE EQUIPMENT REAL ESTATE	NERS USE SS# MENT OF ASSETS & I \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	SPOUSE NAME (City) LIABILITIES AS OF LIABILITIES NOTES PAYABLE T ACCOUNTS PAYAB FEDERAL & STATE ALL OTHER TAXES ACCRUALS, PAYRO DUE ON EQUIPMEN DUE ON REAL ESTA OTHER LIABILITIES CAPITAL STOCK (IF SURPLUS & UNDIV	OF PAPER: ME PHONE: (State) O BANKS O OTHERS LE INCOME TAX DUE DLLS, ETC. NT ATE A CORPORATION) IDED PROFITS	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
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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 Fax: (602) 674-8235

E-Mail info@integritybonds.com