

SURETY BOND

**STATE OF ARKANSAS
State Board of Collection Agencies**

Bond Number _____

KNOW ALL PERSONS BY THESE PRESENTS:

That we, _____, as Principal whose address is _____ and _____ as Surety are held firmly bound unto the State of Arkansas, in the sum of _____ DOLLARS (\$_____) payable in lawful money of the United States of America to the State of Arkansas for the use and benefit of the State and/or any injured party. We firmly bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally by these presents.

The Conditions of the Above Obligations Are Such That:

The person, partnership, , LLC, association or corporation giving the bond shall, upon written demand, pay to the Arkansas State Board of Collection agencies for the party from whom any account, bill or other indebtedness is taken for collection, in accordance with the terms of the agreement upon which it was received for collection and in accordance with the Rules and Regulations of the Arkansas State Board of Collection Agencies.

That the aggregate liability of the Surety for a breach of the conditions of the bond shall, in no event, exceed the amount of the bond. The Surety shall have a right to cancel such bond upon written notice to the Arkansas State Board of Collection Agencies, given at least thirty (30) days prior to the effective date of such termination; and that thereafter, the Surety shall be relieved of liability for any breach of condition occurring after the effective date of the cancellation. This bond is effective until canceled by the Surety.

IN WITNESS WHEREOF, said Principal and Surety have executed this bond, this ____ day of _____, 200 ____.

PRINCIPAL: _____

(Please print)

By: _____

Signature

Name and Title (please print)

SURETY: _____

(Please print)

By: _____

Signature

Name and Title (please print)

(SEAL)

(Attach Power of Attorney)

