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William R. Hanley, Lic.# A110159

RECEIVER - BOND APPLICATION

Please Note: All information requested in this application must be complete. Include full names(s), Social Security numbers, complete street addresses with zip codes, and phone numbers with area codes.

PLEASE ATTACH A COPY OF THE ORDER APPOINTING RECEIVER

PLEASE TYPE OR PRINT LEGIBLY

Name of Applicant:						
			pear on the bor	nd)		
Address:(Street, City, State & Zip Code)						
			,		V 15 A1	
	Work Phone No.(TAX ID No		
Occupation:				Number of years:		
Years of experience in duty applicable to receive	rship:					
How many years will receivership remain open ?		(If more t	than one ye	ear, attach explanation)		
Does the trust Include a Business?	Yes	No	If Yes, att	ach an explanation.		
Has a Bond been issued in this trust before?	Yes	No	If Yes, atta	ach an explanation.		
Is Applicant indebted to the trust?	Yes	No	If Yes, atta	ach an explanation.		
Is Applicant a U.S. Citizen?	Yes	No				
Applicant's Attorney:						
(Street, City, State & Zip Code)						
Phone No.()		FAX No.)		
Will the Attorney remain with the Estate until it is	conclude	d? Yes	No			
Is this bond required by the court? (If yes attach	order)			Bond Amount \$		
Court Bond to be Filed in						
Case No						
Name of Obligee:						
Date of Bankruntov:						

FINANCIAL STATEMENT

Attach accountant's Financial Statement, including Profit & Loss Statement. If none available, complete below. Statement of Applicant's Assets and Liabilities as of:_____

ASSETS	LIABILITIES	LIABILITIES			
Cash(incl.Savings)	Notes Payable				
Stocks & Bonds	Credit Card Balance				
Notes Rec.	All Taxes Payable				
Real Estate (Fair Market Value)	Mortgages Payable				
All Other Assets	All Other Liabilities				
	Total Liabilities				
Total Assets	Net Worth (Total Assets - Total Liabilities)				
The undersigned, hereinafter called the Inde	INDEMNITY AGREEMENT mnitor(s) (if there be more than one Indemnitor they jointly a	nd severally and fo			

or each other do) hereby undertake, represent, warrant and agree as follows:

That the foregoing statements made and answers given in the submitted application are the truth without reservation, and are made for the purpose of inducing the Surety, hereinafter referred to as the Company, to execute or procure the execution of a certain bond or undertaking herein applied for. That this Agreement shall apply to the bond or undertaking herein applied for, and any and all extensions, increases, modifications or renewals thereof, or additions or substitutions therefore, any and all such instruments separately and collectively being hereinafter called the Bond. That the Indemnitor(s) shall pay all premiums and renewal premiums as may become due until the Company shall be discharged and released from any and all liability and responsibility under the Bond. That the Indemnitor(s) shall at all times indemnify, save the Company harmless from, and place the Company in funds to meet any claim, demand, loss, liability, costs, charge, attorney's fee, expense, suit order, judgment, or adjudication arising from the existence of the Bond. That if the Company shall set up a reserve to cover any claim, demand, loss, liability cost, charge, attorney's fee, expense, suit, order judgment or adjudication arising from the existence of the Bond the Indemnitor(s) shall, immediately upon demand, deposit with the Company a sum of money equal to such reserve, such sum to be held by the Company as collateral security for the Bond obligation. That the Company shall have exclusive right to determine for itself and the Indemnitor(s) whether any claim or suit brought against the Company or the Principal, as a result of the existence of the Bond, shall be settled or defended and its decision shall be binding and conclusive upon the Indemnitor(s). That this Agreement shall bind the heirs, executors, administrators, successors and assigns of the Indemnitor(s). That nothing herein contained shall be in derogation of any right remedy which the Company might have independently hereof.

"ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR APPLICATION CONTAINING ANY FALSE. INCOMPLETE. OR

It is understood that applying for this bond will constitute the applicant(s) consent to a credit history review.

MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE." Signed, Sealed and Dated this ______ day of ______, 20____. IF APPLICANT is an INDIVIDUAL, sign here:_____ IF **THIRD PARTY INDEMNITOR**(S), sign here: In consideration of Surety executing the bond hereinabove applied for, I join in the forgoing indemnity agreement. Full Name:

Address: (Street, City, State & Zip Code)