

SURETY BOND (IOWA)

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August 1, 2003

Principal (Licensee)	Surety
Licensee Address	Home Office Address
City State Zip	City State Zip

ADMINISTRATOR: Iowa Superintendent of Banking

BOND NUMBER: _____

THE ABOVE NAMED PRINCIPAL AND SURETY (WHO IS DULY QUALIFIED TO DO BUSINESS IN THE STATE OF IOWA) ARE HEREBY BOUND IN THE PENAL SUM OF _____ DOLLARS (\$ _____) FOR PAYMENT UNDER THE FOLLOWING TERMS AND CONDITIONS:

1. The above-named principal is licensed or has applied to the Superintendent of Banking for a license to engage in the business of money transmission pursuant to Iowa Code Chapter 533C.
2. If the above named principal faithfully conforms to and abides by the provisions of Iowa Code Chapter 533C and all rules and regulations promulgated thereunder, and shall satisfy any loss or damages suffered by the State of Iowa, purchasers or holders of instruments sold by the licensee, or any person(s) who may have a cause of action against the principal, then this obligation shall be void. Otherwise this bond shall remain in full force and effect. The State of Iowa and any person(s) suffering such loss or damages shall have the right to bring an action on this bond against the principal or surety.
3. This bond shall be one continuing obligation and in no event shall the liability of the surety exceed the penal sum of _____ Dollars (\$ _____) for the aggregate of any claims occurring during the term of this bond.
4. The surety shall have the right to terminate its obligation under this bond by filing written notice with the Superintendent of Banking at least thirty (30) days prior to the effective date of such termination. Obligations of the surety arising prior to the effective date shall not be affected by the termination.

This bond shall take effect on _____ and shall continue in force until it is terminated or cancelled.

EXECUTED ON this _____ day of _____, 20 _____

Principal

BY _____

NOTE: Persons executing for surety other than corporate officers must attach Power of Attorney.

SURETY _____

BY _____

ADDRESS _____

PHONE # _____