

KANSAS DEPARTMENT OF REVENUE  
CUSTOMER RELATIONS – MISCELLANEOUS SEGMENT  
915 SW HARRISON ST.  
TOPEKA, KANSAS 66625-5000  
www.ksrevenue.org  
Phone: (785) 368-8222 Fax: (785) 291-3968

Bond No.: \_\_\_\_\_  
Liquor Drink  
Reg. No. \_\_\_\_\_

**LIQUOR DRINK TAX SURETY BOND**

KNOW ALL MEN BY THESE PRESENTS:

That we \_\_\_\_\_,  
(Underline one entity type– Individual Proprietorship, Partnership, LLC or Corporation)

with main office location at \_\_\_\_\_,  
(Street Address) (City) (State) (Zip)

as Principal, and the \_\_\_\_\_,  
(Surety) a corporation authorized to transact business in Kansas, as

surety, are held and firmly bound unto the STATE OF KANSAS in the sum of \_\_\_\_\_ dollars  
( \_\_\_\_\_), lawful money of the United States, to the payment of which, well and truly to be made, we hereby bind ourselves, our  
heirs, executors, administrators, assigns, and successors firmly by these presents.

WHEREAS, the above-named principal has made application to the Director of Taxation for a Liquor Drink Tax Certificate of Registration to  
operate a licensed establishment selling alcoholic liquor at \_\_\_\_\_,  
(Street)  
\_\_\_\_\_, Kansas, and is subject to the Kansas Liquor Drink Tax Act:  
(City)

NOW, THEREFORE, the condition of this obligation is such that if the above-named principal shall well and faithfully comply with all of the  
provisions of the Kansas Liquor Drink Tax Laws, Rules and Regulations relating to the payments of liquor drink tax and penalty due under the laws  
of this State of Kansas, then this obligation shall be void and of no effect; otherwise it shall be and remain in full force and effect. Such principal  
hereby authorizes employees of the Kansas Department of Revenue to disclose to the surety herein a statement of account relating to the tax  
guaranteed by this bond.

This obligation shall be a continuing obligation and shall remain in full force and effect until canceled by the principal and surety after having  
given thirty (30) days written notice to the obligee at the address above.

This bond is effective on and after the \_\_\_\_\_ day of \_\_\_\_\_,  
(Year)

Witness our hands at \_\_\_\_\_, Kansas, this \_\_\_\_\_ day of \_\_\_\_\_,  
(Year)

\_\_\_\_\_  
(Principal)

By \_\_\_\_\_  
(Indicate Position: President, Vice-President, Partner, Owner)

\_\_\_\_\_  
(Surety)

\_\_\_\_\_  
(Surety Address)

\_\_\_\_\_  
(Surety Company Phone Number)

By \_\_\_\_\_  
(Surety Signature)

Its \_\_\_\_\_  
(Bond shall be accompanied by power of attorney for attorney-in-fact. A  
Kansas licensed agent of the surety must countersign.)

SEAL