

**SURETY BOND - DEBT-MANAGEMENT SERVICES PROVIDER**

KNOW ALL PERSONS by these presents that \_\_\_\_\_  
(Applicant-registrant Name)

of \_\_\_\_\_  
(principal address of Applicant-registrant)

as principal (hereinafter "registrant") and \_\_\_\_\_  
(hereinafter "surety"), a surety duly licensed by the Commissioner of Insurance of the State of Colorado, as surety,  
of \_\_\_\_\_  
(surety's address)

are held and firmly bound unto the Attorney General of the State of Colorado acting through the ADMINISTRATOR OF THE UNIFORM CONSUMER CREDIT CODE for use of the PEOPLE OF THE STATE OF COLORADO as obligee (hereinafter "Administrator") in the sum of fifty thousand dollars (\$50,000.00), lawful money of the United States for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns jointly, severally, and firmly by these presents.

WHEREAS, registrant is applying to become or is a registered debt-management services provider pursuant to § 12-14.5-204, C.R.S. and seeks to establish, meet, and maintain the financial responsibility requirements of the Administrator during the term of the subject registration by tender of the within bond,

NOW, THEREFORE, the conditions of this bond are such that if the registrant and its agents shall comply with all provisions of the COLORADO UNIFORM DEBT-MANAGEMENT SERVICES ACT, and the rules and regulations lawfully adopted thereunder, during the term of the debt-management registration for which this bond is applicable, and shall pay any and all final judgments and orders, with expenses, that become due or owed to the Administrator thereunder, and shall pay any and all final judgments that become lawfully due to or on behalf of any individual who has prevailed in a Debt-Management Services Act cause of action against registrant or its agents, then this obligation is null and void, but otherwise to remain in full force and effect,

PROVIDED that the surety's aggregate liability for any and all claims which may arise under this bond shall in no event exceed the amount of this bond, regardless of the number of claims or claimants, and

FURTHER PROVIDED that the surety shall have the right to terminate or reduce its liability hereunder only by giving the registrant and the Administrator written notice of such termination or reduction of liability, sent by Certified U.S. Mail to the Administrator at Consumer Protection Section - UCCC, Ralph L. Carr Colorado Judicial Center, 1300 Broadway, 6th Floor, Denver, Colorado 80203 or the Administrator's most current address. Such termination or reduction of liability shall be effective from and after the expiration of 30 days from the receipt of such notice by the Administrator or on such later date as is stated in the notice; provided, however, that no liability incurred while said bond is in force and prior to said effective date of termination or reduction of liability shall be released or reduced by giving such notice, and

FURTHER PROVIDED, that after giving notice of termination or reduction of liability, and prior to the effective date or such termination or reduction of liability, the surety may reinstate or increase its liability by the execution and filing of a new bond or by mailing written notice to the Administrator indicating that the surety desires to continue as surety for the registrant and that its prior notice of termination or reduction of liability is withdrawn and rescinded.

FURTHER PROVIDED that, if this bond is not previously terminated as set forth above, the liability of the surety shall expire two (2) years after the registrant ceases providing debt-management services to individuals in this state.

THIS BOND shall be effective on and after \_\_\_\_\_ (date) or, if left blank, the date of execution by surety shall be the effective date of the bond. The bond shall be effective, if accepted by the Administrator, without further notice.

WITNESS our hands and seals:

REGISTRANT OR APPLICANT:

[CORPORATE SEAL]

\_\_\_\_\_  
(Debt-Management Provider's Name)

By: \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

**SURETY MUST ATTACH POWER OF ATTORNEY**

[SURETY SEAL]

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

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)