Bond No	
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## Department of Consumer & Business Services Insurance Division — 4

P.O. Box 14480, Salem, OR 97309-0405 Phone: 503-947-7982, Fax: 503-378-4351 350 Winter St. NE, Salem, Oregon insurance.oregon.gov

Life Settlement Provider Bond

		, principal licensee,
(Name)	(Address)	arroty on incurar
(Name)	(Address)	, surety, an insurer,
duly authorized to transact surety in	nsurance in the state of Oregon, are	bound unto the State of Oregon in the
sum of \$100,000. These parties, the	eir successors, and their assigns are	jointly and severally bound.
The condition of the foregoing oblig	gation:	
The principal holds or has applied f	for a license to transact the business	s of a life settlement provider in the State
of Oregon.		
The Insurance Code and regulations	s of the state of Oregon require tha	t the principal must furnish either cash,
securities, or a bond to the state trea	asurer to guarantee the faithful perf	formance by the principal of all the
principal's transactions in accordan	ce with ORS 744.319 to 744.358 a	nd OAR 836-014-0200 to 836-014-0330.
If the principal faithfully performs	all transactions subject to ORS 744	1.319 to 744.358 and OAR 836-014-0200
to 836-014-0330, this obligation sha	all be void; otherwise, it shall rema	ain in full force and effect.
The surety has the right to terminate	e any future liability by giving writ	tten notice to the principal and the
director of the Department of Const	umer and Business Services. The s	urety shall be discharged from any future
liability for any default of the princ	ipal occurring after 60 days from the	he receipt of such notice by the director.



If the principal is a corporation, this bond agreement is to be executed in the corporation's name by its president and attested to by its secretary, and the corporate seal affixed. For the surety, this bond agreement is to be executed in its name by its president and attested to by its secretary, signed by its authorized attorney-in-fact, and its corporate seal affixed.

Dated this	day of	
Principal:		
Ву:	(Name)	(Indicate president or individual)
_	(rume)	SEA
Ву:	(Name)	, Corporate secretary (if applicable)
Surety:		
Ву:	(Name)	(Title)
D	(,	SEA
By:	(Name)	, Attorney-in-fact (if applicable)

Power of attorney granting authority to an attorney-in-fact executing this bond on behalf of the surety must be attached to this bond form.