

**NOTARIAL BOND  
TO THE  
STATE OF OKLAHOMA**

**Commission No.**

**PLEASE NOTE:** File the bond form and a \$10.00 fee with the office of the Secretary of State, 2300 N. Lincoln Blvd., Room 101, Oklahoma City, Oklahoma 73105-4897

KNOW ALL MEN BY THESE PRESENTS:

That \_\_\_\_\_ of \_\_\_\_\_  
(Name of Notary) (Residence Address or, if a Non-resident, Employment Address)  
in the county of \_\_\_\_\_, State of Oklahoma, as Principal, lately appointed Notary Public within and for the State of  
Oklahoma, and  
\_\_\_\_\_ of \_\_\_\_\_  
(Name of Surety) (Residence address)  
\_\_\_\_\_ of \_\_\_\_\_  
(Name of Surety) (Residence address)

as Sureties, are held and firmly bound unto the State of Oklahoma in the penal sum of One Thousand (\$1,000.00) Dollars, good and lawful money of the United States, to be paid to the State of Oklahoma, for which payment will and truly be made, we bind ourselves, our heirs, executors and administrators, jointly and severally, firmly by these presents.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Whereas, the above bounden Principal has been appointed to the Office of Notary Public, within and for the State of Oklahoma.

NOW, THE CONDITIONS OF THIS OBLIGATION ARE SUCH, that if said Principal shall faithfully, in all things, perform all duties required by law as a Notary Public within and for said State during the term of said office by virtue of said appointment, then the above obligation to be void, else to remain in full force.

We, the sureties on the bond herein, being severally sworn each for himself, is worth at least One Thousand (\$1,000.00) Dollars over and above all debts and liabilities by him owing, and all property exempt by law from levy and execution.

Principal Sign Here → \_\_\_\_\_  
Surety Sign Here → \_\_\_\_\_  
Surety Sign Here → \_\_\_\_\_

**ACKNOWLEDGMENT OF SURETIES**

State of Oklahoma  
County of \_\_\_\_\_

Signed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by  
\_\_\_\_\_ and \_\_\_\_\_  
(Name of Surety) (Name of Surety)

My Commission Expires: \_\_\_\_\_  
(SEAL) Notary Public (or other authorized officer)  
Commission # \_\_\_\_\_

**TO BE COMPLETED BY THE NOTARY**

Sign your name on the line below the same as you  
sign all public documents.

IMPRESS YOUR  
SEAL HERE

Sign Here → \_\_\_\_\_

**OATH OF OFFICE**  
(Oklahoma Constitution Article XV)

State of Oklahoma  
County of \_\_\_\_\_

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support, obey, and defend the Constitution of the United States, and the Constitution of the State of Oklahoma, and that I will not knowingly, receive, directly or indirectly, any money or other valuable thing, for the performance or nonperformance of any act or duty pertaining to my office, other than the compensation allowed by law; I further swear (or affirm) that I will faithfully discharge my duties as a Notary Public to the best of my ability.

\_\_\_\_\_  
Signature of Principal

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public or other officer authorized to administer oaths or affirmations

My Commission Expires: \_\_\_\_\_

Commission # \_\_\_\_\_

(SEAL)

**LOYALTY OATH**  
(51 O.S., Section 36.2A)

State of Oklahoma  
County of \_\_\_\_\_

I do solemnly swear (or affirm) that I will support the Constitution and the laws of the United States of America and the Constitution and the laws of the State of Oklahoma, and that I will faithfully discharge, according to the best of my ability, the duties of my office or employment during such time as I am a Notary Public.

\_\_\_\_\_  
Signature of Affiant

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public or other officer authorized to administer oaths or affirmations

My Commission Expires: \_\_\_\_\_

Commission # \_\_\_\_\_

(SEAL)

(SOS FORM 109-10/2004)

# INTEGRITY SURETY BOND APPLICATION

AGENCY NAME: \_\_\_\_\_ AGENCY CONTACT \_\_\_\_\_  
 AGENCY PHONE: \_\_\_\_\_ AGENCY FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 AGENCY ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT?** \_\_\_\_\_

**NAME OF PREVIOUS SURETY COMPANY WRITING THE BOND?** \_\_\_\_\_

**SECTION I: BOND APPLIED FOR:**

TYPE OF BOND: \_\_\_\_\_ EFF.DATE: \_\_\_\_\_ EXP.DATE: \_\_\_\_\_  
 TYPE OF COMPANY CORP  LLC  DBA  PARTNERSHIP  AMOUNT: \_\_\_\_\_  
 OBLIGEE: \_\_\_\_\_

OBLIGEE ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**SECTION II: GENERAL INFORMATION**

APPLICANT'S NAME: \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
 SS#: \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 RESIDENTIAL ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

BUSINESS NAME: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ BUSINESS FAX: \_\_\_\_\_ Client E-mail \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

DATE BUSINESS BEGAN UNDER CURRENT NAME: \_\_\_\_\_ BUSINESS TAX ID: \_\_\_\_\_

HAS ANY COMPANY REFUSED TO ISSUE BONDS FOR ANY PURPOSE? YES  NO  DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS AGAINST YOU? YES  NO

HAS APPLICANT EVER FAILED IN BUSINESS? YES  NO  HAS APPLICANT EVER FILED BANKRUPTCY? YES  NO

**IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER:**

**SECTION III: ADDITIONAL OWNERS / PARTNERS**

APPLICANT'S NAME: \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
 SS#: \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 RESIDENTIAL ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**STATEMENT OF ASSETS & LIABILITIES AS OF \_\_\_\_\_**

ASSETS		LIABILITIES	
CASH IN BANK	\$	NOTES PAYABLE TO BANKS	\$
CASH ON HAND	\$	NOTES PAYABLE TO OTHERS	\$
STOCKS & BONDS	\$	ACCOUNTS PAYABLE	\$
ACCOUNTS RECEIVABLE	\$	FEDERAL & STATE INCOME TAX DUE	\$
NOTES RECEIVABLE	\$	ALL OTHER TAXES	\$
INVENTORY	\$	ACCRUALS, PAYROLLS, ETC.	\$
CASH VALUE OF LIFE INSURANCE	\$	DUE ON EQUIPMENT	\$
EQUIPMENT	\$	DUE ON REAL ESTATE	\$
REAL ESTATE	\$	OTHER LIABILITIES	\$
OTHER ASSETS	\$	CAPITAL STOCK (IF A CORPORATION)	\$
		SURPLUS & UNDIVIDED PROFITS	\$
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH</b>	<b>\$</b>
<b>NAME OF OWNERS</b>		<b>NAME &amp; TITLE OF OFFICERS</b>	<b>PERCENTAGE OF OWNERSHIP</b>

Completion of this form constitutes permission to obtain consumer information which will be used to determine bonding eligibility This information will be held in the strictest confidence no premium financing will be accepted as premium is earned in full.

**Integrity Bonds Inc**

**Toll Free: (866) 420-2613**

**Local (480) 626-8916**

**E-Mail info@integritybonds.com**

**Fax: (602) 674-8235**