Bureau of Securities Bond Form

Bond #:

Nebraska Department of Banking & 1526 K Street, Suite 300

Finance http://www.ndbf.nebraska.gov
PO Box 95006
Lincoln, NE 68509-5006
402-471-3445

That	
-	(Name of Broker-Dealer or Investment Adviser)
	(Address of Broker-Dealer or Investment Adviser)
as Principal, having filed	d with the Nebraska Department of Banking & Finance on or about the
day of	,, an application to transact business in the State of
Nebraska as a(n):	
	, and
(I	Designate whether Principal is Broker-Dealer or Investment Adviser)
	(Name and address of Surety)
suretyship in the State Nebraska, for the use a obligation, including any twenty-five thousand do Nebraska; provided, how	on organized under the laws of the State/Commonwealth/Territory of and being duly authorized to transact the business of indemnity and of Nebraska, do hereby acknowledge our indebtedness to the State of and benefit of any person(s) having a claim under the conditions of this person(s) having a cause of action under Section 8-1118, in the sum of a claim (\$25,000), as required by Section 8-1103 of the Securities Act of wever, that the aggregate liability hereunder shall not exceed the sum of llars (\$25,000), regardless of the number of claimants, and shall not be iability.
	ent of this sum, to which we hereby obligate and bind ourselves, our heirs, s, successors and assigns, jointly and severally, becomes effective upon
Registration/Lice a(n):	nsing of the Principal to transact business in the State of Nebraska as

2.	Failure by the Principal to strictly comply with all applicable provisions of, and orders, rules					
	and regulations issued pursuant to, the applicable securities statutes of the State of Nebraska.					

THIS Bond shall expire at such time as the Principal's registration is withdrawn, terminated through non-renewal or revoked by the Nebraska Department of Banking & Finance <u>except</u> as to liability for acts or omissions which occur prior to the date of cancellation. This Bond may also be cancelled by the Surety upon thirty days written notice by registered mail to the Principal and to the Nebraska Department of Banking & Finance, in which case this Bond shall be considered cancelled upon expiration of said thirty day period <u>except</u> as to liability for acts or omissions which occur prior to the date of cancellation. Notice shall be deemed effective upon receipt by the Nebraska Department of Banking & Finance of said written notice along with sufficient proof of notice to the Principal.

NO suit may be maintained to enforce any liability arising under this Bond unless brought within three years after the contract of sale or the rendering of investment advice upon which liability is based.

IT is understood and agreed that any person(s) having a claim under the conditions of this obligation may initiate suit in any court of competent jurisdiction against the Principal and/or Surety upon this Bond.

WITNESS OUR SIGNATURES, this	day of	,	
		(Principal)	
	Ву:		
		(Officer)	
		(Title)	

			(Surety)	
		Ву:		
			(Agent of Surety)	
			(Title)	
		By:	ounter-Signature of Agent of Surety)	
		(00	ounter-Signature of Agent of Surety)	
	Indi	/idual Acknowledge	ment	
State of				
County of	SS.			
		hofor	o mo norconally annoared	
day of		, known by me	e me personally appearede to be the person described	in and who
as his/her free act and d		incipal, and acknowled	ged to me that he/she execute	a the same
			(Notary Public)	
(1	Notarial Seal)	Residing at:		My
		Commissio	n Expires:	
			•	
	LLC or P	artnership Acknowl	edgement	
State of				
County of	SS.			
		,, befor	e me personally appeared	
the foregoing instrument	t. and acknowled	, known by me t	e me personally appeared to be a member of the firm who luly executed the same as and	executed for the act
and deed of said firm.	., and domiomiou	5-3 to 1110 that 110/0110 to	, should the came as and	.5 401

			(Notary Public)	
	(Notarial Seal)	Residin	ng at:	
		Му Со	mmission Expires:	
		Corporate Ackno	wledgement	
State of	f			
County	of	= -		
	, , I	and says that he/she i Principal heretofore na	_, before me personally appeared _ is the of med; that he/she executed the fore s, and affixed its seal thereto.	
			(Notary Public)	
	(Notarial Se	eal) Residing at	t:	My
		Со	mmission Expires:	
NOTE:	A true and correct copy of the a "Attorney in Fact."	oplicable "Power of Attorney	r" must be attached hereto where the Bond i	's subscribed to by an