



REIMBURSEMENT FINANCING
Unemployment Reserve Fund Surety Bond
Section 108.151, Wisconsin Statutes

Please take notice that the undersigned principal, _____

Street	City	State	Zip Code
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and the undersigned surety, a corporation duly licensed and authorized to transact business in the State of Wisconsin, are held and firmly bound, jointly and severally, unto the Unemployment Reserve Fund of the State of Wisconsin, in the sum of \$_____ (an amount determined in accordance with section 108.151 (4)(a)1. Wisconsin Statutes). This obligation binds the principal and surety, and their heirs, executors, administrators, successors and assigns.

This obligation is required because the principal has elected, under section 108.151 of the Wisconsin Statutes, to discharge its monetary obligations incurred under the Wisconsin Unemployment Insurance Law by means of reimbursement financing, and the principal is required by section 108.151 (4)(a) of the Wisconsin Statutes to file a surety bond with the Treasurer of the Unemployment Reserve Fund of the State of Wisconsin to guarantee the payment of required reimbursements, together with any interest and any late filing fees.

NOW THEREFORE, if the principal shall pay or cause to be paid to the Wisconsin Unemployment Reserve Fund the full amount of its reimbursement payments, when due, together with any interest and any late filing fees, then this obligation shall be void, but otherwise it shall be in full force and effect.

The surety's total liability shall in no event exceed the amount of the bond as set forth above.

The obligation of this bond shall be in force from the date of the principal's election of reimbursement financing January 1, 20_____ until released in the manner provided in section 108.151 (4)(a) 2. of the Wisconsin Statutes, except that the bond shall be in force to at least December 31, 20_____.

*The undersigned principal and surety have signed and sealed this bond
the _____ day of _____ 20 ____.*

WITNESS (1):

Signature

Typed Name

PRINCIPAL:

Signature

Typed Name

Title



WITNESS (2):

Signature

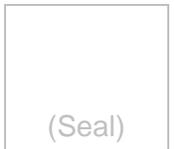
Typed Name

SURETY:

Signature

Typed Name

Title



NAME AND MAILING ADDRESS OF WITNESS (1):

Name

P.O. Box/Street Address

City, State, Zip Code

NAME AND MAILING ADDRESS OF PRINCIPAL:

Name

P.O. Box/Street Address

City, State, Zip Code

NAME AND MAILING ADDRESS OF WITNESS (2):

Name

P.O. Box/Street Address

City, State, Zip Code

NAME AND MAILING ADDRESS OF SURETY:

Name

P.O. Box/Street Address

City, State, Zip Code