

**FUND RAISING COUNSEL OR PAID SOLICITOR BOND**

***PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM***

BOND NUMBER: \_\_\_\_\_

State the name and address of the insurance agency through which this bond was purchased:

Agency Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State & Zip Code \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS:

That \_\_\_\_\_ of  
Name of Fund Raising Counsel or Paid Solicitor

Address of Fund Raising Counsel or Paid Solicitor

as Principal, and

\_\_\_\_\_, a corporation organized and

Name of Surety Company

existing under the laws of the State of \_\_\_\_\_, and duly authorized by  
Name of State

law to become surety on bonds in the State of Connecticut, as Surety, are held and firmly bound jointly and severally, unto the State of Connecticut and to any person who may have a cause of action against the Principal for any liabilities arising out of the conduct of business by the Principal as Fund Raising Counsel or Paid Solicitor, in the sum of TWENTY THOUSAND DOLLARS (\$20,000.00), lawful money of the United States of America, to be paid to the Commissioner of Consumer Protection, State of Connecticut, for the use of the State of Connecticut, and to any person who may have a cause of action against the Principal for any such liabilities, as their interests may appear, not exceeding in the aggregate the said sum of TWENTY THOUSAND DOLLARS (\$20,000.00) for which payment well and truly to be made we, the Principal and Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, by these presents.

WHEREAS, the above bounden Principal intends to register with the Department of Consumer Protection of the State of Connecticut as Fund Raising Counsel or Paid Solicitor for the purpose of acting as Fund Raising Counsel or Paid Solicitor for a charitable organization required to register with the Department of Consumer Protection of the State of Connecticut pursuant to the Connecticut General Statutes.

NOW, the condition of the obligation is such that if the above bounden Principal shall register as such Fund Raising Counsel or Paid Solicitor with the Department of Consumer Protection of the State of Connecticut, and said Principal shall faithfully and honestly act as such Fund Raising Counsel or Paid Solicitor in accordance with law, and fully complies with all applicable provisions of the Connecticut General Statutes, and if the Principal shall fully indemnify and save harmless from loss the State of Connecticut and any person who may have a cause of action against the Principal for any liabilities arising out of the conduct of business as such Fund Raising Counsel or Paid Solicitor, then this obligation shall be void, otherwise to be and remain in full force and effect. This bond shall not become void upon the first recovery thereon but may be sued upon from time to time until the full amount thereof shall have been exhausted.

This bond is to cover all claims arising on account of the registration of the Principal as Fund Raising Counsel or Paid Solicitor, and his acting as such.

This bond shall be effective for the full annual term hereof beginning:

\_\_\_\_\_, and expiring on \_\_\_\_\_

Effective Date (mm/dd/yyyy)

Expiration Date (mm/dd/yyyy)

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Principal (Fund Raising Counsel or Paid Solicitor )

Surety

By:

By:

Signature and title of authorized representative of  
Principal

Attorney-in-Fact (Attach copy  
of Power of Attorney)

**ACKNOWLEDGMENT OF INDIVIDUAL**

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ before me personally appeared \_\_\_\_\_, known to me to be the individual whose name is subscribed to the foregoing instrument and acknowledged the he has executed the same for the purposes therein contained.

\_\_\_\_\_  
Notary (seal)

**ACKNOWLEDGMENT OF PARTNERSHIP OR LIMITED LIABILITY COMPANY**

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ before me personally appeared \_\_\_\_\_, known to me to be the individual whose name is subscribed to the foregoing instrument as \_\_\_\_\_ of the firm of \_\_\_\_\_ and acknowledged to me that he executed the same on behalf of said firm and for the purposes therein contained.

\_\_\_\_\_  
Notary (seal)

**ACKNOWLEDGMENT OF CORPORATION**

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ before me personally appeared \_\_\_\_\_, who acknowledged him/herself to be the \_\_\_\_\_ of \_\_\_\_\_, a corporation and that he as such corporate officer, being authorized so to do, executed the foregoing instrument for the purposes therein contain, by signing his/her name on behalf of said corporation.

\_\_\_\_\_  
Notary (seal)

