



**ARKANSAS INSURANCE DEPARTMENT  
LICENSE DIVISION  
1200 WEST 3<sup>RD</sup> STREET  
LITTLE ROCK, AR 72201  
PHONE: 501-371-2750  
FAX: 501-683-2604**

FORM AID-LI-TPA-BOND (3/05)

**THIRD PARTY ADMINISTRATOR BOND**

Bond No. \_\_\_\_\_

**KNOW ALL MEN BY THESE PRESENTS:**

That we, \_\_\_\_\_ of \_\_\_\_\_, as  
Principal, and \_\_\_\_\_ of \_\_\_\_\_,  
being duly qualified to transact business in the state of Arkansas as Surety, are held and firmly bound unto the State  
of Arkansas, in the full and just sum of Twenty-Five Thousand Dollars (\$25,000) lawful money of the United States  
for payment of which sum, will and truly be made, we hereby bind ourselves, our and each of our heirs, executors  
and administrators, successors and assigns, jointly and severally, firmly by these presents.

**THE CONDITIONS OF THIS OBLIGATION IS SUCH THAT:**

WHEREAS, the above bounden principal has taken all necessary legal steps as required by the Insurance  
Commissioner of the State of Arkansas to qualify as a Third Party Administrator and doing and performing such  
other acts as may be necessary to comply with all requirements of the Arkansas Insurance Code, as amended,  
including the maintenance of this Bond, in the amount aforesaid, said Bond to assure the faithful performance of the  
Principal's obligation to its subscribers and/or sponsoring clients in the State of Arkansas while this Bond is in effect.

NOW THEREFORE, the condition of the obligation is such that if the above bounden Principal shall well and truly  
comply with the laws of the State of Arkansas pertaining to Third Party Administrators by the full accounting and  
due payment, to the person entitled thereto, of any funds coming into the possession of the Administrator, then this  
obligation shall be null and void; otherwise to remain in full force and effect.

PROVIDED, this bond may be cancelled by the Surety by filing thirty (30) days written cancellation notice by  
Registered Mail with the Insurance Commissioner, State of Arkansas, Little Rock, Arkansas, and with the  
Administrator/Principal.

IN WITNESS WHEREOF, the Principal has hereunto set his hand and the Surety has caused its corporate name to  
be hereunto signed, and its corporate seal attached by its duly authorized Attorney-in-fact the day and year first  
above written.

\_\_\_\_\_  
Principal

BY \_\_\_\_\_  
Title

\_\_\_\_\_  
Surety

BY \_\_\_\_\_  
Attorney-in-fact

Countersigned: