BOND FOR CIGARETTES, CIGARETTE PAPERS, SNUFF, CIGARS OR TOBACCO DISTRIBUTOR

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
LICENSING SECTION
SFN 6967 (4/2013)

License Number (Office Use Only)

Name of Principal		
City	State	County
Name of Surety		
State in which Surety is Organized		
Penal Sum $1,000.00	Effective Date	

KNOW ALL MEN BY THESE PRESENTS, that the Principal and Surety named above, who are authorized to engage in business in the State of North Dakota, are held and firmly bond unto the State of North Dakota, for the benefit of all parties interested, in the sum of One Thousand Dollars, lawful money of the United States, to be paid unto the State of North Dakota, for which payment well and truly to be made we jointly and severally bind ourselves, our heirs, successors, administrators and assigns, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT WHEREAS, the above named Principal has applied or intends to apply to the Attorney General of North Dakota for a license to sell at wholesale cigarettes, cigarette papers, snuff, cigars or tobacco in this State.

NOW THEREFORE, in consideration of the issuance of the said license, if the said principal shall faithfully observe all the provisions of the laws of North Dakota relating to the regulation and sale of cigarettes, cigarette papers, snuff, cigars or tobacco, and all rules and regulations promulgated by the Attorney General in pursuance thereof, including the payment of all stamp and other taxes, fines, penalties and costs provided for in said statutes and for which the said principal may or shall become liable pursuant thereto, then this obligation shall be null and void; otherwise to remain in full force and effect.

This bond is a continuing obligation and shall cover the full period or periods of licensing of the Principal including the present and all renewal licenses which said Principal may be granted; provided, that it is hereby expressly agreed that nothing contained herein shall be deemed or construed to reduce the liability of the Principal and Surety below the penal sum set forth above for each and every licensing period for which the named Principal shall be licensed, the same as if a new bond in the said penal sum were entered into for each and every separate period.

This bond may be canceled at any time by the Surety by giving written notice of such cancellation by registered mail to the Attorney General of the State of North Dakota and to the Principal, and all liability hereunder shall terminate thirty (30) days after receipt by the Attorney General of such notice, except that the liability of the Principal and Surety shall apply as provided herein to any acts or omissions which may have occurred prior to the effective date of such cancellation.

Note:

1) If Principal is a corporation, LLC, etc., officer signing must attach resolution authorizing execution.
2) Attorney-in-Fact must attach a valid Power of Attorney from Surety.

IN WITNESS WHEREOF, we have hereunto set our hands and seals as of the day and year first herein above written.

Name of Principal	
Signature	Title

Surety Name	Attorney in Fact		
Address	City	State	ZIP Code
Signature			

APPROVAL ND OFFICE OF ATTORNEY GENERAL

Approved as to form on behalf of North Dakota Attorney General	Approval Date
Signature of Assistant Attorney General	

ACKNOWLEDGMENT OF PRINCIPAL

State of
County of

Individual signing on behalf of Principal on page 1

Name	Title

As of the date indicated below,

☐ IF BY INDIVIDUAL USE THIS FORM — Personally appeared the individual identified above, known to me to be the person who is described in and who executed the within instrument as obligor, and he acknowledged to me that he executed same.

☐ IF BY CO-PARTNERSHIP USE THIS FORM — Personally appeared the individual identified above, known to me to be one of the members of the co-partnership that is described in and that executed the within instrument for and on behalf of said co-partnership as obligor, and he acknowledged to me that he executed the same for said co-partnership.

☐ IF BY CORPORATION USE THIS FORM — Personally appeared the individual identified above, known to me to be an officer of the corporation that is described in and that executed the within instrument as obligor, and he acknowledged to me that such corporation executed the same.

☐ IF BY LIMITED LIABILITY COMPANY USE THIS FORM — Personally appeared the individual identified above, known to me to be a governor or member of the limited liability company that is described in and that executed the within instrument as obligor, and he acknowledged to me that such limited liability company executed the same.

Notary Stamp	Subscribed to and sworn before me	Date
	Signature of Notary Public	
	Commission Expiration Date	

ACKNOWLEDGMENT FOR SURETY COMPANY

State of
County of

Individual signing on behalf of Surety on page 1

Attorney In Fact
Surety Name

As of the date indicated below before me, the undersigned, a notary public in and for said county and state, personally appeared the individual identified above known to me to be the person who is described in and whose name is subscribed to the within instrument as the attorney in fact of the above named surety and he acknowledged to me that he subscribed the name of the surety identified above and his own name as attorney in fact.

Notary Stamp		
	Subscribed to and sworn before me	Date
	Signature of Notary Public	
	Commission Expiration Date	

RESOLUTION

Name	Title
Principal Name	State in which Principal is Incorporated or Organized
Bond Amount $1,000.00	

RESOLVED, that the individual named above is hereby authorized and directed to deliver to the State of North Dakota for and on behalf of the corporation or limited liability company a tobacco products distributor bond in the amount provided for above.

☐ IF BY CORPORATION USE THIS FORM

As secretary of the corporation, incorporated under the laws of the state named above, I hereby certify that the foregoing is a full, true and correct copy of a resolution of the board of directors of the corporation duly and regularly adopted by the corporation as required by law and the bylaws of the corporation.

IN WITNESS WHEREOF, I have set my hand as such secretary, and affixed the seal of the corporation (if any), as signed and dated below.

Secretary Signature	Date

☐ IF BY LIMITED LIABILITY COMPANY USE THIS FORM

As a member or governor of the limited liability company, organized under the laws of the state named above, I hereby certify that the foregoing is a full, true and correct copy of a resolution of the board of governors of the limited liability company duly and regularly adopted by the limited liability company as required by law and the articles of organization of the limited liability company.

IN WITNESS WHEREOF, I have set my hand as such member or governor, and affixed the seal of the limited liability company (if any), as signed and dated below.

Member or Governor Signature	Date