

**LIFE SETTLEMENT PROVIDER
NH RSA 408-D VI.(4)**

Hampshire stating the date of termination. Cancellation by the Surety Company will not be effective until 90 days following receipt of written notice to the Insurance Commissioner and the Principal.

IN WITNESS WHEREOF, the parties herein have caused this bond to be executed this

_____ day of _____, 20_____.

(Principle)

By _____

(Witness)

(Witness)

By _____