PREPAID LEGAL SERVICES COMPANY
SPECIAL DEPOSIT BOND
STATE OF SOUTH CAROLINA

Bond Number ____________________

KNOW ALL MEN BY THESE PRESENTS, That the undersigned ____________________________
as principal of ____________________________ and the undersigned ____________________________
as surety, of ____________________________ are firmly held and bound unto the Administrator of the Department of
Consumer Affairs of the State of South Carolina in full and just sum of $__________ dollars, to which payment we bind
ourselves and our respective successors and assigns jointly and severally.

Sealed with our seals and dated at ______________________ this _________ day of ___________ in the year of our
Lord two thousand and _____.

WHEREAS, Section 37-16-20 of the Code of Laws of South Carolina, 1976, as amended, requires that a prepaid legal
services company deposit and thereafter continuously maintain a bond in the amount of $__________ dollars. The bond is
to be executed by a surety company authorized by the laws of this State to transact business in South Carolina and must be
for the use of the State as well as any customers who have a cause of action against the prepaid legal services company.

AND WHEREAS, the ____________________________ aforesaid, desires to transact business within the State of South
Carolina in accordance with the terms of its laws and to deposit with the Administrator a good and solvent bond in the sum of
$__________ dollars, does by this instrument furnish that bond.

NOW THEREFORE, the condition of this bond is such that if the above principal has failed to comply with the Prepaid
Legal Services Act, S.C. Code § 37-16-20 et seq., or has failed to provide contracted prepaid legal services to customers as
determined by the Administrator after notice and opportunity for hearing, then we the Beneficiary (South Carolina
Department of Consumer Affairs) are entitled to the sum of $__________.

PROVIDED, HOWEVER, that liability hereunder may be terminated either (a) by written notice from the surety to the
Administrator that liability shall terminate upon the expiration of forty five (45) days from the date of such notice, or (b) upon
written authorization mailed to the surety by the Administrator.

IN WITNESS whereof the principal and surety have set their hands and affixed their seals in the manner and form
following:

In presence of witnesses as to principal:
(1)__________________________________________
(2)__________________________________________

By: ______________________________________
President (Officer)

In presence of witnesses as to surety:
(1)__________________________________________
(2)__________________________________________

By: ___________________________________
President (Officer)

EXECUTION BY PRINCIPAL AND SURETY MUST BE PROBATED ON REVERSE SIDE.
WITNESS AS TO PRINCIPAL

STATE OF ________________,
_________________________ County.

Before me, the subscribing Notary Public, personally appeared ____________________________ Witness number one (see front of bond) and made oath that he/she saw the within named ____________________________ Company represented by ____________________________ sign, seal, and deliver the within Bond, and that he/she with ____________________________ subscribed their names as witness thereto.

Witness Number two (see front of bond)

Sworn to and subscribed before me this ________ day of ________________ A.D., 20___.

_______________________________________ To be signed by witness one or two (see front of bond)

________________________
Notary Public

WITNESS AS TO SURETY

STATE OF ________________,
_________________________ County.

Before me, the subscribing Notary Public, personally appeared ____________________________ Witness number one (see front of bond) and made oath that he/she saw the within named ____________________________ Company represented by ____________________________ sign, seal, and deliver the within Bond, and that he/she with ____________________________ subscribed their names as witness thereto.

Witness Number two (see front of bond)

Sworn to and subscribed before me this ________ day of ________________ A.D., 20___.

_______________________________________ To be signed by witness one or two (see front of bond)

________________________
Notary Public
Persons executing for the Surety, other than corporate officers, must attach a Power of Attorney authorizing such person to execute surety bonds for the Surety.

Mailing Address of the Surety
_________________________________
Mailing Address of the Department of Consumer Affairs
_________________________________
Department of Consumer Affairs
P.O. Box 5757
Columbia, South Carolina 29250-5757
Tel. No. __________________________ Telephone Number 803-734-4200

NAME, ADDRESS AND TELEPHONE NUMBER OF SURETY CONTACT IN THE EVENT A CLAIM MUST BE FILED.
NAME: ____________________________
TITLE: _____________________________
ADDRESS: __________________________
____________________________________
(CITY, STATE AND ZIP CODE)
E-MAIL: ___________________________
TEL. NO. __________________________
FAX NO. ___________________________