State of California Secretary of State	
SURETY BOND NURSES' REGISTRY (Civil Code Section 1812.525)	
Bond Number	(Office Use Only)
The premium of this bond isfor the term of	to .
KNOW ALL PERSONS BY THESE PRESENTS:	
That	
(Name of Principal)	
doing business as(Name of Business)	
a nurses' registry, whose address is	
Street Address City	State Zip
as PRINCIPAL, and(Name of Surety)	, a corporation
organized under the laws of	ve bind ourselves, our heirs, executors,
WHEREAS, the provisions of Section 1812.525 of the Civil Code, req with the Secretary of State a copy of a bond in the sum of three thousand dolla tendered in accordance therewith.	
<b>NOW THEREFORE,</b> the conditions of the foregoing obligations are provisions of Title 2.91 (commencing with Section 1812.524), Part 4 of Div California, and pays all sums due any individual or group of individuals when su has received such sums, and pays all damages occasioned to any person by u mentioned above, or of its agents or employees while acting within the scope of to be void; otherwise it is to remain in full force and effect.	ision 3 of the Civil Code of the State of ch Principal or its representativeor agent nlawful acts or omissions of the Principal

**PROVIDED HOWEVER**, this bond is issued subject to the following express conditions:

- 1. This bond shall be deemed continuous in form and shall remain in full force and effect for the term of the initial bond and all subsequent riders, for all liabilities, acts, omissions, or causes arising after this bond becomes effective and before the cancellation or withdrawal of the Surety from the bond.
- 2. This bond is executed by the Surety to comply with the provisions of Title 2.91 (commencing with Section 1812.524), Part 4 of Division 3 of the Civil Code and of Chapter 2 (commencing with Section 995.010), Title 14, Part 2 of the Code of Civil Procedure and said bond shall be subject to all of the terms and provisions thereof.
- 3. The aggregate liability of the Surety hereunder on all claims whatsoever shall not exceed the penal sum of this bond in any event.
- 4. This bond may be canceled by the Surety in accordance with the provisions of Sections 996.310 et seq. of the Code of Civil Procedure.

	(Name of Surety)	
(Address of Surety)		
ertify under penalty of perjury, under th unrevokedpower of attorney.	e laws of the State of California, that I have executed the foregoing bond un	
cecuted in(City, State)	on (Date)	
(City, State)	(Date)	
	Signature of Attorney-In-Factfor Surety	
	Printed or Typed Name of Attorney-In-Factfor Surety	
INSTRUCTIONS:		
1. The term for all bonds submitted	shall not be less than twenty-four (24) months.	
2. Send the executed document an	d filing fee to:	
	California Secretary of State P.O. Box 942870 Sacramento CA 94277-2870	
3. Include the filing fee of \$30.00.		
4. There is no fee for filing an amer	ndmentto a previouslyfiled bond.	

ACKNOWLEDGMENT		
certificate verifies of who signed the door	other officer completing this only the identity of the individual cument to which this certificate is he truthfulness, accuracy, or ument.	
State of		
County of	)	
On	before me,(insert r	, Notary Public
subscribed to the with his/her/their authorize person(s), or the entit	the basis of satisfactory evidence to b hin instrument and acknowledged to m ed capacity(ies), and that by his/her/the ty upon behalf of which the person(s) a LTY OF PERJURY under the laws of th	e that he/she/they executed the same in eir signature(s) on the instrument the
WITNESS my hand a	and official seal.	
Signature		