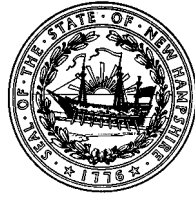


THE STATE OF NEW HAMPSHIRE
INSURANCE DEPARTMENT

Christopher R. Nicolopoulos
Commissioner



**NEW HAMPSHIRE
THIRD PARTY ADMINISTRATOR BOND**

BOND NO. _____

KNOW ALL MEN BY THESE PRESENTS:

That we, _____, as Principal, and

WHEREAS the said Principal has applied to the Commissioner of Insurance of the State of New Hampshire to be licensed as a Third Party Administrator in the State of New Hampshire as prescribed in New Hampshire Revised Statutes Annotated RSA 402-H and is required by Regulations Ins 2300 of the New Hampshire Insurance Department to give bond unto the Commissioner of Insurance for the State of New Hampshire to guarantee the payment of all claims or other legal obligations which the Principal fails to pay, up to the amount of this bond, which arise from the operations of the Principal in the State of New Hampshire.

NOW, THEREFORE, this bond will continue in full force and effect until terminated in the following manner. This bond may be cancelled by the Insurance Commissioner for the State of New Hampshire by written notice from the Insurance Commissioner to the Surety hereon, which notice shall specify the date of termination of the bond.

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

**NEW HAMPSHIRE
THIRD PARTY ADMINISTRATOR BOND**

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IN WITNESS WHEREOF, the parties herein have caused this bond to be executed this _____
day of _____, 20_____.

Principal

By _____

Witness

Witness

By _____