

Alaska Cigarette Stamp Surety Bond

Principal Name			Bond Number	
Mailing Address			Business Type (Check One)	
City	State	ZIP Code	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
			<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> LLC
			<input type="checkbox"/> Other	

We, as principal(s), and _____ as surety,

 (Name of Insurance Company)

a corporation incorporated under the laws of the State of _____ and authorized to do business in the State of Alaska, execute this bond, and are held and firmly bound unto the State of Alaska, Department of Revenue, in the sum of \$ _____, the payment of which we bind ourselves, our executors, administrators, heirs, assigns, and successors, jointly and severally, firmly by this bond.

The condition of the foregoing obligation is that the above bound principal(s) shall pay when due all cigarette taxes, penalties and interest due and to become due and owing to the State of Alaska by said principal during the fiscal year beginning July 1, _____ and ending June 30, _____, under the provisions of the cigarette tax and licensing laws of the State of Alaska (AS 43.50).

This bond may not be canceled, and furthermore, the liability herein assumed shall continue until the statute of limitations has expired on all cigarette excise taxes due to the State of Alaska of said principal for the fiscal year indicated above.

In witness whereof, the above bound parties have executed this instrument this _____ day of _____, 20 _____, the name and seal of each party being hereto affixed and is duly signed by its undersigned representative, if any, pursuant to authority of its governing body.

(seal)

ATTEST:

 (Secretary of Principal)

 (Principal)

By:

 (Authorized Agent)

(seal)

ATTEST:

 (Secretary of Surety)

 (Surety)

By:

 (Authorized Agent)