



**DEPARTMENT OF THE TREASURY  
BUREAU OF THE FISCAL SERVICE  
WASHINGTON, DC 20227**

OMB 1530-0009

**\*\*\* LICENSE SHEET \*\*\***

Name of Company	
State of Incorporation	
NAIC Company Code	
NAIC Group Code	
Contact Name	
Contact Title	
Contact Phone Number	
Contact E-Mail	
Date	

Please indicate by checking the box beside the states and other areas in which your company is licensed to transact SURETY business as a DIRECT WRITER. NOTE: If any restrictions have been imposed by states checked, include an explanation on an attached sheet. The explanation should include the type, reason for and time period of the imposed restriction.

AL Alabama
AK Alaska
AS Am. Samoa
AZ Arizona
AR Arkansas
CA California
CO Colorado
CT Connecticut
DE Delaware
DC District of Columbia
FL Florida
GA Georgia
GU Guam
HI Hawaii
ID Idaho
IL Illinois
IN Indiana
IA Iowa
KS Kansas

KY Kentucky
LA Louisiana
ME Maine
MD Maryland
MA Massachusetts
MI Michigan
MN Minnesota
MS Mississippi
MO Missouri
MP Northern Mariana Islands
MT Montana
NE Nebraska
NV Nevada
NH New Hampshire
NJ New Jersey
NM New Mexico
NY New York
NC North Carolina
ND North Dakota

OH Ohio
OK Oklahoma
OR Oregon
PA Pennsylvania
PR Puerto Rico
RI Rhode Island
SC South Carolina
SD South Dakota
TN Tennessee
TX Texas
UT Utah
VT Vermont
VA Virginia
VI Virgin Islands
WA Washington
WV West Virginia
WI Wisconsin
WY Wyoming