

SIGNATURE GUARANTEE MEDALLION SURETY BOND PROGRAM

Hartford Fire Insurance Company Summary

STAMP Surety Bond Limits / SEMP Surety Bond Limits	Annual Premium	Two -Year Term Premium	Three-Year Term Premium
\$100,000 Any One Transaction / \$200,000 Aggregate Limit	\$200		\$520
\$250,000 Any One Transaction /			
\$500,000 Aggregate Limit \$500,000 Any One Transaction /	\$500		\$1,300
\$1,000,000 Aggregate Limit	\$1,000		\$2,600
\$750,000 Any One Transaction / \$1,500,000 Aggregate Limit	\$1,500		\$3,705
\$1,000,000 Any One Transaction / \$2,000,000 Aggregate Limit	\$1,800		\$4,420
\$2,000,000 Any One Transaction / \$4,000,000 Aggregate Limit	\$3,800		\$9,360
\$5,000,000 Any One Transaction /			
\$10,000,000 Aggregate Limit \$10,000,000 Any One Transaction	\$8,500	\$15,300	\$21,100
/ \$20,000,000 Aggregate Limit	\$16,000	\$30,600	\$41,000

Independent Contractor Rider - Hartford does not charge additional premium for the Independent Contractor Rider.

DOCUMENTS REQUIRED FOR RENEWAL

• Fidelity Bond Policy Limit Requirement

A copy of the Declarations from the fidelity bond policy is requested if Association Member Benefits Advisors, LLC (AMBA) does not currently assist you in securing your Fidelity Bond. For STAMP Surety Bond (Any One Transaction) of \$250,000 or greater, the fidelity bond policy limits for Insuring Agreements A, B, C, D and E must be equal to or greater than the STAMP Surety Bond (Any One Transaction) Limit.

If the Named Insured on the Declarations is an entity other than the Principal on the STAMP Surety Bond, be sure to include a copy of the Additional/Joint Insured Rider.

• Underwriting Information / Financial Information

If applying for a limit of \$2,000,000 or greater, the following Financial Information is required: a copy of current Audited Report (must include a Balance Sheet, Income Statement, Cash Flow Statement, Change in Equity Statement, Notes, and Internal Control Report) and copies of current FOCUS Report.

If there are one or more "Yes" responses to Questions 7 - 13, include with the application all of the information requested in the above paragraph.

If there is a Third Party Indemnitor, such as a Parent Company or Individual Owner/Partner, please provide a copy of a current Audit/Financial Statement. The financial statement should include a Balance Sheet and Income Statement.

The surety reserves the right to request additional information.

DISCLOSURE STATEMENT

Association Member Benefits Advisors, LLC (AMBA) performs the following functions for Hartford Fire Insurance Company: underwriting, securing terms, and upon acceptance, issuance. Association Member Benefits Advisors, LLC (AMBA) receives 30 per cent commission from Hartford Fire Insurance Company.

