

MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS **DIVISION OF WORKERS' COMPENSATION**

P.O. Box 58, Jefferson City, MO 65102-0058

Guaranty To Satisfy Compensation Claims Under Workers' Compensation Law of Missouri

IN THE MATTER OF	IN '	THE	MATTER	OF
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, to

guarantee prompt and full payment of any and all of its liabilities under or by virtue of the Workers' Compensation Law
of Missouri.
KNOW ALL MEN BY THESE PRESENTS:
That the Undersigned,
a corporation organized and existing under and by virtue of the Laws of the State of
, being financially interested in the
, a corporation organized and existing under and by virtue of the Laws of
, and desiring to enable said
to comply with the Laws of the State of Missouri, known
as "Workers' Compensation Law", in consideration of the granting of the right of self-insurance or to continue as a
self-insurer if authority has been granted under said Law to
, by the State of Missouri, Division of Workers' Compensation,
does hereby agree and guarantee on behalf of said
, that any and all liabilities against said
, under or by virtue of said "Workers' Compensation Law" will be
promptly and fully paid. This guarantee shall enure to the benefit of and may be enforced by the State of Missouri and any
and all employees or dependents of said
having a claim or which may have a claim against it under said Law or

by the State of Missouri, Division of V	Vorkers' Com	pensation, as establi	shed by said Law, for the benefit of any such		
employee or employees or their depende	ents of said				
		,			
IN WITNESS WHEREOF said					
has caused this instrument to be signed b	y its presiden	t and its corporate se	al to be hereunto affixed and attested by its sec-		
retary, this	day of		,		
		SIGNED:	Corporation		
		by:			
			President		
(Seal)					
Attest:					
Secretary					
STATE OF	_ (
	(
COUNTY OF	_(
On this	d	lay of	,, before me, personally		
came	, to me known who, being duly sworn, did depose and say that he/she				
resides in	, that he/she is				
		of the			

the corporation described in and which executed the foregoing instrument; that he/she knows the seal of the said corporation; that he/she knows the seal affixed to said instrument is such corporate seal, that it was affixed by the order of the Board of Directors of said corporation and that he/she signed his/her name thereto by like order. WITNESS my hand and seal the day and year aforesaid.

Notary Public

My Commission expires:

(NOTARY SEAL)

This instrument must be accompanied by a certified copy of the resolution duly adopted by the Board of Directors (or stockholders) authorizing and directing the execution of this agreement.