Oregon Department of Agriculture 635 Capitol Street NE Salem, Oregon 97301-2532 (503) 986-4620 Hearing Impaired TDD #(503) 986-4762



Policy No. \_\_\_\_\_

## WHOLESALE PRODUCE DEALER'S BOND

KNOW ALL MEN BY THESE PRESENTS	<b>KNOW ALL</b>	MEN BY	THESE	PRESENTS
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That		
of		
(Street address)	(City)	(Zip)
		as principal, and
(County)	(State)	
		, a corporation
organized under the laws of the State of		
and authorized to transact business in the State of O the State of Oregon for the benefit of growers of p (\$15,000), for the payment of which, well and truly to our heirs, executors, administrators and successors, jo	roduce in the sum of Fifte be made, we bind ourselve	en Thousand Dollars es, our, and each of
The CONDITION of the above obligation is su engaged in the business of a wholesale produce deale	uch that, whereas, the abov er as defined in ORS 585.07	ve bounded principal is 1 0.

NOW, THEREFORE, if said principal shall faithfully perform all obligations to growers of produce then this obligation shall be void, otherwise to be and remain in full force and effect. This bond covers the period commencing \_\_\_\_\_\_\_, \_\_\_\_\_, and ending June 30, \_\_\_\_\_\_.

SIGNED AND SEALED this		_day of , ,
Name and Address of Bonding Company:		Principal
Name		
Mailing Address		Secretary (if corporation)
		_ Surety
City	State Zip	
Telephone Number (	)	Surety
E-mail Address		-
		Resident Agent

Bonding Company Corporate Seal (Please stamp below)