



KANSAS DEPARTMENT OF REVENUE  
 ALCOHOLIC BEVERAGE CONTROL DIVISION  
 915 SW Harrison Street, Room 214  
 Topeka, Kansas 66625-3512  
 Telephone 785-296-7015 Fax 785-296-7185

**SURETY BOND**  
**FOR LIQUOR LICENSES ISSUED UNDER THE LIQUOR CONTROL ACT**  
 Pursuant to K.S.A. 41-317

KNOW ALL MEN BY THESE PRESENTS: That we \_\_\_\_\_  
 (Principal)  
 of the City of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_  
 as Principal, and \_\_\_\_\_,  
 (Surety)  
 under and by virtue of the laws of the State of \_\_\_\_\_, duly licensed to do business in the State of  
 Kansas, as surety are held and firmly bound unto the Director of the Alcoholic Beverage Control Division for and on  
 behalf of the State of Kansas in the penal sum of \$ \_\_\_\_\_ Dollars for the payment of which each of  
 us, do bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally.

WHEREAS, the Principal has applied for or has been licensed by the Director of the Alcoholic Beverage Control  
 Division of the State of Kansas as a:  Retailer  Beer Distributor  Spirits Distributor  Wine Distributor  
 Farm Winery  Microbrewery  Manufacturer  Non-Beverage User  Special Order Shipping

NOW, THEREFORE, if the said Principal shall faithfully comply with the provisions of the Kansas Liquor Control  
 Act and the rules and regulations of the Director of the Alcoholic Beverage Control in all respects, and shall  
 promptly pay all fees, fines and taxes which may be assessed, then this obligation shall be null and void,  
 otherwise to remain in full force and effect. Such principal hereby authorizes employees of the Kansas  
 Department of Revenue to disclose to the surety herein all matters relating to the tax guaranteed by this bond.

This bond is effective on and after the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, unless  
 (Day) (Month) (Year)  
 cancellation of such bond is approved by the Director of the Alcoholic Beverage Control Division, Department of  
 Revenue, after having been given thirty (30) days notice by the principal and surety.

Witness our hands at \_\_\_\_\_, \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
 (Location) (State) (Day) (Month) (Year)

**SURETY COMPANY (please print)**

Signature of Attorney-in-Fact\* for Surety Company:  
 Attorney-in-Fact Name:  
 Attorney-in-Fact Phone Number:  
 Surety Company Name:  
 Surety Company Mailing Address:  
 Surety Company Phone Number:

**BOND NUMBER:**

**PRINCIPAL (please print)**

Signature of Principal or Agent:  
 Title:  
 Name:  
 Mailing Address:  
 Phone Number:  
 Check Entity Type:  Individual  Corporation  Partnership  LLC  LLP  Trust  Government  Other

**For ABC Office Use Only**

License Number(s):	Rep's Initials:	<input type="checkbox"/> Bond Released	Date:	Rep's Initials:
FEIN:	Date:	<input type="checkbox"/> Bond Demand	Date:	Rep's Initials:

\* K.A.R. 14-17-1 Bond must be accompanied by power of attorney for Attorney-in-Fact.  
 ABC-804 (Rev. 11.4.09)