BOND NUMBER __________

CO-SURETY RIDER

The undersigned co-sureties have executed the attached bond as a joint and several liability of the said co-sureties and agree that the County may enforce the bond, up to the penal sum stated therein, against either of the undersigned alone, against both of the undersigned in one action, or against both of the undersigned in separate actions, simultaneously or sequentially, without in any way electing, or being deemed to have elected, any remedy or releasing any right against the other surety. In the event of a default by the Principal, the only limit on the County’s recovery is the penal sum of the bond which, however, is the maximum aggregate liability of the sureties not a per surety limit.

DATED THIS ____ day of ______________________ 20__.

__________________________
Surety
By: ______________________ (SEAL)
Name: ______________________
Title: ______________________

__________________________
Surety
By: ______________________ (SEAL)
Name: ______________________
Title: ______________________

STATE OF ______________________
COUNTY OF ______________________

I, the undersigned, a Notary Public in and for the State and County aforesaid, do hereby certify that _____________, as ________________, on behalf of ________________, whose name is signed to the foregoing Co-Surety Rider dated ________________, 20__, has acknowledged the same before me in my State and County aforesaid.

GIVEN under my hand and seal this ____ day of ______________________, 20__.

__________________________
Notary Public

My Commission Expires: ________________
My Notary Registration Number: ________________

STATE OF ______________________
COUNTY OF ______________________

I, the undersigned, a Notary Public in and for the State and County aforesaid, do hereby certify that _____________, as ________________, on behalf of ________________, whose name is signed to the foregoing Co-Surety Rider dated ________________, 20__, has acknowledged the same before me in my State and County aforesaid.

GIVEN under my hand and seal this ____ day of ______________________, 20__.

__________________________
Notary Public

My Commission Expires: ________________
My Notary Registration Number: ________________

[POWERS OF ATTORNEY MUST BE ATTACHED]