



**ILLINOIS WORKERS' COMPENSATION COMMISSION  
SELF-INSURER'S SURETY BOND  
GENERAL PURPOSE RIDER**

*To be attached to and form a part of the Self-Insurer's Surety Bond*

Bond No.: \_\_\_\_\_

Executed by: \_\_\_\_\_, as Principal (Employer),

and by: \_\_\_\_\_, as Surety,

in favor of: Illinois Workers' Compensation Commission, as Obligee.

In consideration of the mutual agreements herein contained the Principal and Surety hereby agree to the following changes:

Change Name From: \_\_\_\_\_

To: \_\_\_\_\_

Change Amount From: \_\_\_\_\_ To: \_\_\_\_\_

Addition (A) and Deletion (D) of Principal (Employer)

Nothing herein contained shall vary, alter, or extend any provision or condition of the Surety Bond except as expressly stated.

**PRINCIPAL (EMPLOYER) CORPORATE SEAL**

**SURETY CORPORATE SEAL**

\_\_\_\_\_  
Signature of Principal's representative Date

\_\_\_\_\_  
Signature of Attorney-In-Fact Date

\_\_\_\_\_  
Name and title

\_\_\_\_\_  
Name and title