



**ILLINOIS WORKERS' COMPENSATION COMMISSION**  
**SELF-INSURER'S SURETY BOND**  
**CANCELLATION AMENDMENT AND ACKNOWLEDGEMENT**

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

Cancellation Effective Date: \_\_\_\_\_

**Principal (Employer)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

**Surety**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Whereas, the Principal is continuing without interruption as a private self-insurer pursuant to permission granted by the Illinois Workers' Compensation Commission, and

Whereas, the Principal has furnished a new surety bond or other financial security instrument acceptable to the Illinois Workers' Compensation Commission to guarantee the Principal's performance as a private self-insurer from and after the Cancellation Effective Date of the Surety Bond listed above,

Now, therefore, the Surety Bond listed above is amended, and the Surety thereon hereby is released and discharged. The Surety Bond is cancelled on the Cancellation Effective Date listed above and the Surety's obligation thereon is void.

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

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

This cancellation and amendment is acknowledged by the Illinois Workers' Compensation Commission.

\_\_\_\_\_  
Chairman Date