



COMMONWEALTH OF VIRGINIA
 VIRGINIA WORKERS' COMPENSATION COMMISSION
 333 EAST FRANKLIN STREET, RICHMOND VA 23219
 804-205-3586
www.workcomp.virginia.gov

PEO PARENTAL GUARANTEE

_____, a corporation organized under the laws of the State of _____
 (Parent)

_____, with a principal office location at _____,
 (State) (Address)

on account of its financial interest in _____,
 (PEO) has controlling ownership

of, or shares common ownership with _____,
 (Parent)

and in consideration of the benefits to it accruing, does hereby guarantee prompt and full payment of all liability

of the _____ arising under the Virginia Workers'
 (PEO) Compensation Act. This Parental Guarantee ensures the benefit of and may be enforced by any and all employees

of _____ in the event of the filing of a claim under the Act.
 (PEO)

IT WITNESS WHEREOF, _____ has caused this instrument to be
 (Parent)

signed by its duly authorized officer and its corporate seal to be hereunto affixed and attested by its Secretary, this

this _____ day of _____, 20_____.

(SEAL)

 (Corporate Officer's Signature)

 (Print Corporate Officer's Name and Title)

ATTEST: _____
 (Corporate Secretary's Signature)