

**FORM 12**  
**SUPERSEDEAS BOND (SURETY)**

**United States Court of Federal Claims**

_____,	)	
	)	
Plaintiff,	)	No. _____
	)	
v.	)	Judge _____
	)	
THE UNITED STATES,	)	
	)	
Defendant.	)	

**SUPERSEDEAS BOND (SURETY)**

**Recitals**

1. A judgment was entered in the above-captioned case on \_\_\_\_\_ [date] in the United States Court of Federal Claims against Appellant, \_\_\_\_\_ [name of appellant] and in favor of \_\_\_\_\_ [name(s) of appellee(s)].
2. \_\_\_\_\_ [name of appellant] has filed a timely notice of appeal of this judgment to the United States Court of Appeals for the Federal Circuit and desires to suspend enforcement of the judgment pending determination of the appeal.

**Promise to Pay**

As a result of the facts just recited:

\_\_\_\_\_ [name of appellant] and \_\_\_\_\_ [names of corporate surety or sureties], which has an office and usual place of business at \_\_\_\_\_ [street address], \_\_\_\_\_ [city, state, zip code], each undertakes and promises to pay to \_\_\_\_\_ [name(s) of appellee(s)] all damages, costs, and interest that may be awarded to \_\_\_\_\_ [him or her or it or them] following the appeal of this matter up to the sum of \$ \_\_\_\_\_ if:

- a. the judgment so appealed is affirmed;
- b. the appeal is dismissed; or
- c. \_\_\_\_\_ [name of appellant] fails to pay promptly all sums awarded against \_\_\_\_\_ [him or her or it or them] in or following the appeal in this action, including any costs that the court of appeals may award if the judgment is modified.

If \_\_\_\_\_ [name of appellant] fulfills the obligations on appeal set forth above, then this obligation will become void. Otherwise, the obligation will remain in full force and effect.

Dated: \_\_\_\_\_

For the principal:

\_\_\_\_\_ [signature of plaintiff]

\_\_\_\_\_ [typed name of plaintiff]

For the \_\_\_\_\_ [surety or sureties]

\_\_\_\_\_ [typed or printed name of surety]

By \_\_\_\_\_ [signature]

\_\_\_\_\_ [typed name of signer]

\_\_\_\_\_ [title of signer]

\_\_\_\_\_ [street address]

\_\_\_\_\_ [city, state, zip code]

\_\_\_\_\_ [telephone number]

\_\_\_\_\_ [e-mail address]

[Repeat signature block for each additional surety.]

APPROVED: \_\_\_\_\_, 20\_\_

\_\_\_\_\_, Clerk, United States Court of Federal Claims