

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

05/08/96

PRODUCER

Bartholomew & Son, Inc.
P. O. Box 311
58 South Napoleon St.
Valparaiso IN 46384

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER	A	SECURA INS. CO.
COMPANY LETTER	B	
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

96035166

INSURED

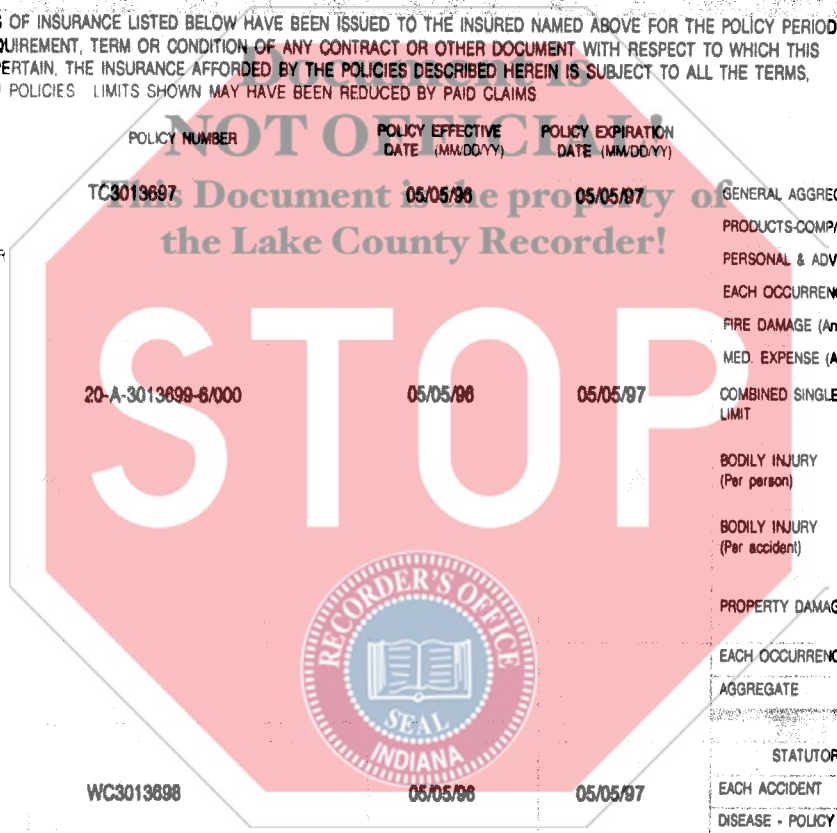
A Unland And Son Inc
2924 Drexel Dr.

Hobart IN 46342

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR OWNERS & CONTRACTOR'S PROT	TC3013697	05/05/96	05/05/97	GENERAL AGGREGATE PRODUCTS-COMP/OP AGG PERSONAL & ADV INJURY EACH OCCURRENCE FIRE DAMAGE (Any one fire) \$ 50000 MED. EXPENSE (Any one person) \$ 5000
A	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY	20-A-3013699-6/000	05/05/96	05/05/97	COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ 25000 BODILY INJURY (Per accident) \$ 50000 PROPERTY DAMAGE \$ 10000 EACH OCCURRENCE \$ AGGREGATE \$
A	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	WC3013698	05/05/96	05/05/97	STATUTORY LIMITS EACH ACCIDENT \$ 50000 DISEASE - POLICY LIMIT \$ 50000 DISEASE - EACH EMPLOYEE \$ 50000
	OTHER				



MAHONVILLE, INDIANA
 RECORDER
 96 MAY 24 PM 3:39
 FILED FOR RECORD
 STATE OF INDIANA
 LAKE COUNTY

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Lake County
Lake County Complex
2293 N. Main Street
Crown Point IN 48307

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

[Handwritten Signature]