## STATE OF INDIANA

Insurance	CERTIFICATE OF INSURANCE
This is to certify that the policies was in the Bolding Bolding have UNITED FARM BUREAU MUTUAL INSTANCE COMPATING CONTRACT COMPATING CONTRACT COMPATING CONTRACT COMPATING CONTRACT CON	SURANCE COMPANY  NY MARGARETTE CLEVEL AND.
MILUTIN MILJUS 7429 72ND CT HOBART IN 46342	LAKE COUNTY PLANNING COMMISSION 2293 N MAIN ST CROWN POINT IN 46307
Description of Automobile (if applicable):	
Description of Operation (if applicable):	
Location of Operation (if applicable):	and the state of t
Type of Liability Coverage Policy Number	Expiration Limits of Liability Date
	Property Dama  Each Person  County Recoreach Occurrence

1 Aba of monity acres	Number	Date			
AUTOMOBILE	NOTO	FFICI	A Bodily Injury	Property Damage	
	his Documen	at is the pro	Each Person	Each Occurrence	
	the Lake C	ounty Reco	Each Occurrence		
			Bodily Injury and Property Damage Combined Single Limit		
			Each Occurrence		
GENERAL LIABILITY			Bodily Injury	Property Damage	
Includes:  Premises/Operations		DER'S OF	Aggregate	Aggregate	
Protective			Bodily Injury and Property Damage Combined Single Limit		
Products/Completed Operations	NEW POLICY	7-9-96	Each Occurrence		
Contractual	a) e-ghistia (ti) out maka liming	A MANA TO SERVICE AND A MANAGEMENT OF THE SERVICE AND A MANAGE	1,000,000		
WORKER'S COMPENSATION			Statutory		
Only applies to losses covered under the Indiana Worker's Compensation Act. Includes Other					
States Endorsement.			3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		

The Company will make every effort to notify the holder of this Certificate of any material change in or cancellation of these policies, but assumes no responsibility for failure to do so. 4-9-96 bk

Only AGENCY MANAGERS, ASSISTANT AGENCY MANAGERS, COUNTY MANAGERS and AUTHORIZED HOME OFFICE personnel may sign the Certificate in behalf of the Company