Bond Safeguard Insurance Company				
246 East Janata Boulevard, Lombard, Illinois 60148 (630) 495-9380 BOND NO 35- 3 0 6 0 3				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
LIOPNOE AND/OD DEDMIT BOND				
(ONLY VALID IF FILLED IN FOR LESS THAN \$25,001.00 AND OBLIGEE IS AN INDIANA COUNTY, CITY, TOWN OR VILLAGE.)				
KNOW ALL MEN BY THESE PRESENTS:				
That we G_M_Contractors, Inc. (Principal's Name)				
301 St Andrews Dr. Schererville, Ind. 46375-2949 (Principal's Address)				
as Principal, and BOND SAFEGUARD INSURANCE COMPANY, an insurance company duly licensed in the				
State of Indiana, as Surety, are held and firmly bound unto ALL CITIES AND TOWNS, LAKE COUNTY INDIANA.				
State of Indiana, Obligee, in the aggregate sum of				
In consideration thereof, the Principal is granted a license and/or permit by the Obligee to engage in the business of General Contractr for the period beginning on the 5 day of October, 1999,				
business ofGeneral Contracotr ake County Recorder!				
for the period beginning on the5day ofCtoberN, 1999,				
and ending on the				
THEREFORE: the condition of this bond is that, if said Principal shall comply with all of the conditions of the ordinances and regulations of the Obligee pertaining to said license and/or permit, then this obligation shall be null and void; otherwise to remain in full force and effect subject to the following conditions: 1. This obligation may be extended from year to year at the option of the Surety, by continuation certificate executed by the Surety;				
2. This obligation may be cancelled by the Surety upon giving thirty (30) days written notice to the Obligee. However, this obligation shall remain in full force and effect as to the acts or omissions of the above mentioned Principal prior to the cancellation of the bond.				
Dated this				
G.M. Contractors, Inc.				
Principal Countersigned:				
Officer				
BOND SAFEGUARD INSURANCE COMPANY				
BY: Dissum WHester				
ACKNOWLEDGEMENT OF SURETY (Corporate Officer) President				
ACKNOWLEDGEMENT OF SURETY				
Y I MAINANCE I TO I				
STATE OF ILLINOIS) SS COUNTY OF DUPAGE) SS				
On this 20th day of May 19 98, before me, the undersigned officer personally appeared William W. Hector, who acknowledged himself to be the aforesaid officer of BOND SAFEGUARD INSURANCE COMPANY, a corporation, and that he, as such officer, being authorized to do so, executed the foregoing instrument for the purpose therein contained, by signing the name of the corporation by himself as such officer. IN WITNESS WHEREOF, I have hereunto set my hand and official seal.				
"OFFICIAL SEAL" JANET L. COPPOCK JANUA S. Coppock				
Notary Public, State of Illinois				
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ACKNOWLEDGMENT OF PRINCIPAL (INDIVIDUAL OR PARTNERS)

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STATE OF) ss		
On this	Waternya	19 <i>5</i> 5, before me pe	ersonally appeared
	e executed the same.	ment is	ment and acknowl-
May 5, 300	ACKNOWLEDGMI (CORPORA	inty Recorder: NOTARY PUBLIC LAKE	Notary Public NDA L DOWD ESTATE OF INDIANA COUNTY IN EXP MAY 5,2000
COUNTY OF		19 hofore me no	orsonally appeared
On this		, 19, before me pe	
		, who acknowle	_
the and that he as such off therein contained by sig	of icer being authorized so to d ning the name of the corpora	o, executed the foregoing instrumention by himself as such officer.	, a corporation, t for the purposes
My commission expires:			
	, 19		Notary Public