

Bond Safeguard INSURANCE COMPANY

1919 S. Highland Ave. • Bldg. A - Suite 300 • Lombard, IL 60148 (630) 495-9380

BOND NO. 15- 306915

J

INDIANA LICENSE AND/OR PERMIT BOND

(ONLY VALID IF FILLED IN FOR LESS THAN \$25,001.00
AND OBLIGEE IS AN INDIANA COUNTY, CITY, TOWN OR VILLAGE.)

99088984

KNOW ALL MEN BY THESE PRESENTS:

That we Gorman Drywall
(Principal's Name)
P. O. Box 18 Mokena, IL 60448
(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 Town of St. John, IN

State of Indiana, Obligee, in the aggregate sum of Five Thousand & 00/100** Dollars (\$5,000.00**) to the payment of which sum the said Principal and Surety bind themselves and their heirs, administrators, executors, successors and assigns, jointly and severally by these presents.

In consideration thereof, the Principal is granted a license and/or permit by the Obligee to engage in the business of Drywall Contractor

for the period beginning on the 04th day of August 1999
and ending on the 04th day of August 2000

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 04th day of August 1999

Gorman Drywall Principal

Countersigned: Nick Diorio Agency, Inc.

[Signature] Officer

BOND SAFEGUARD INSURANCE COMPANY

BY: *[Signature]*

BY: William W. Hector President

ACKNOWLEDGEMENT OF SURETY (Corporate Officer)

STATE OF ILLINOIS }
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
Notary Public, State of Illinois
My Commission Expires 8/14/01

[Signature]
Notary Public, State of Illinois

[Handwritten initials]

ACKNOWLEDGMENT OF PRINCIPAL
(INDIVIDUAL OR PARTNERS)

STATE OF INDIANA)
COUNTY OF LAKE) SS

On this 28th day of October, 1999 before me personally appeared
Melvin H. Weidner

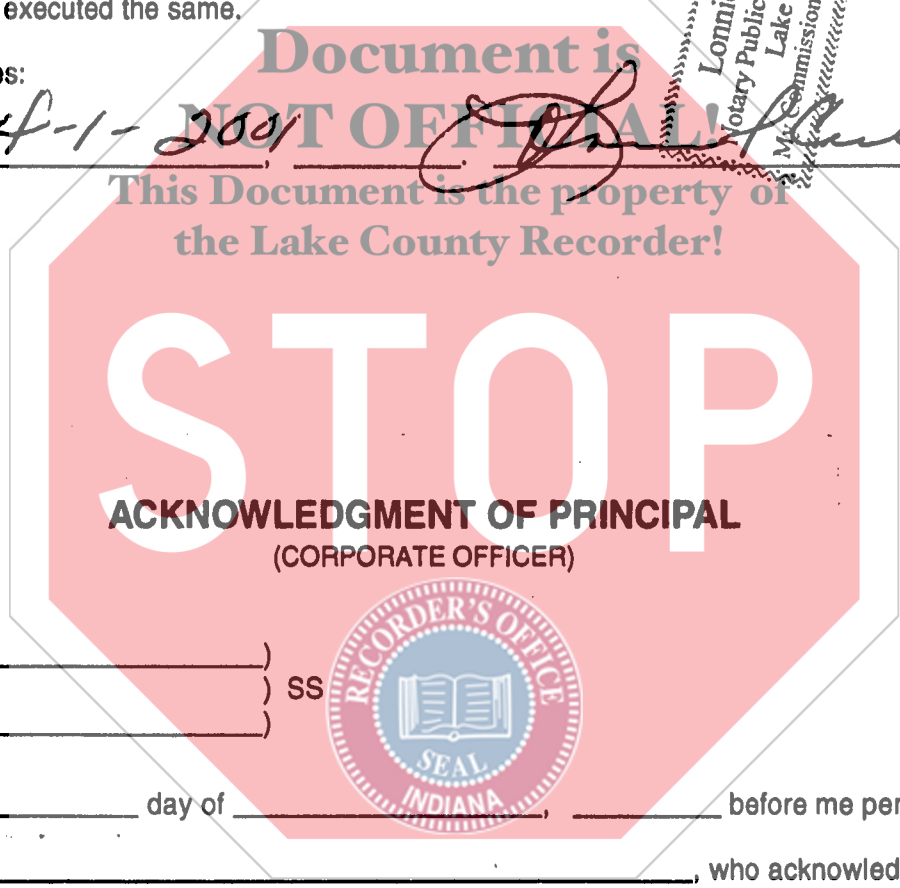
known to me to be the individual _____ described in and who executed the foregoing instrument and acknowledged to me that he executed the same.

My commission expires:
4-1-2001

Notary Public, State of Indiana
Lake County
Commission Exp. 01/01/2001
Lonnie Carter

[Handwritten Signature]

Notary Public



ACKNOWLEDGMENT OF PRINCIPAL
(CORPORATE OFFICER)

STATE OF _____)
COUNTY OF _____) SS

On this _____ day of _____, _____ before me personally appeared

_____, who acknowledged himself to be the _____ of _____, a corporation

and that he as such officer being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by himself as such officer.

My commission expires:

Notary Public