

**Bond Safeguard** INSURANCE COMPANY

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

BOND NO. 15- 306194

**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.)

2000 01 12 69

KNOW ALL MEN BY THESE PRESENTS:

That we Paul Leader  
(Principal's Name)

18120 Mary Ann Lane, Country Club Hills, IL 60478  
(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, Towns & Municipalities within Lake County, IN State of Indiana, Obligee, in the aggregate sum of Five Thousand 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 License & Permit for the period beginning on the 15th day of February and ending on the 15th day of February

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 15th day of February, 2000

Paul Leader  
Paul Leader Principal

Countersigned: Rykovich Insurance Agency, Inc. \_\_\_\_\_  
Officer

BOND SAFEGUARD INSURANCE COMPANY

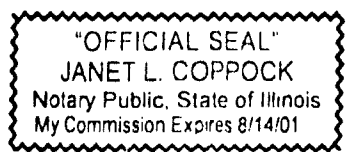
BY: [Signature] BY: William W. Hector  
President

**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.



Janet L. Coppoek  
Notary Public, State of Illinois

10:00 am

