

**Document is  
NOT OFFICIAL!**

**This Document is the property of  
the State of Indiana Recorder!**

**Ohio Farmers Insurance Co.**

**Westfield Insurance Co.**

Continuation  
Certificate

2000 016372

Westfield Companies  
Westfield Center, Ohio 44251-5001

In consideration of an agreed premium payable in advance, the Bond described below is hereby continued in force for the period indicated. Continuation is subject to the condition that the maximum aggregate liability under the Bond and any and all continuations thereof shall in no event exceed the amount of liability shown herein. This endorsement shall be valid only when executed by an attorney-in-fact of this Company.

BOND NO. 5801398	ORIGINAL EFFECTIVE DATE 03/05/99	BOND AMOUNT \$5,000.00	RENEWAL PREMIUM \$50.00	FROM CONTINUED TO 03/05/00 03/05/01
PRINCIPAL Edmonds Tree Service, Jim Edmonds DBA				
OBLIGEE All Cities, Towns & Municipalities Of Lake County, Indiana				
TYPE OF BOND (DESCRIBE)		EXECUTED AT (City - State)		DATE EXECUTED
PUB. OFFICIAL	SURETY License/Permit	Hobart, Indiana		03/08/00

Smith Insurance Agency  
Agency  
Hobart, Indiana  
City & State

By *Monica K. Johnson*  
Monica K. Johnson Attorney-in-Fact

10.00  
8.00  
CS

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>PRICE Edward Dean</b>		2. SERVICE NUMBER <b>916 05 44</b>		3. SOCIAL SECURITY NUMBER <b>328   38   4075</b>																																											
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>Navy - USN</b>		5a. GRADE, RATE OR RANK <b>RM3</b>	b. PAY GRADE <b>E-4</b>	6. DATE OF RANK <b>16 APR 67</b>	DAY <b>16</b>	MONTH <b>APR</b>	YEAR <b>67</b>																																								
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Chicago, Illinois</b>		9. DATE OF BIRTH <b>06 DEC 46</b>	DAY <b>06</b>	MONTH <b>DEC</b>	YEAR <b>46</b>																																								
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>11 24 46 228</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>#24 Chicago, Illinois</b>		c. DATE INDUCTED <b>N/A</b>																																											
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Active Duty</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>USS NEWPORT NEWS (CA-118)</b>																																													
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>BuPers Manual Art. C-10317(1)(b) -209- Release from active duty within three months of (cont. in BLOCK 30)</b>		d. EFFECTIVE DATE <b>22 OCT 68</b>	DAY <b>22</b>	MONTH <b>OCT</b>	YEAR <b>68</b>																																										
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>USS NEWPORT NEWS (CA-118)</b>		13a. CHARACTER OF SERVICE <b>HONORABLE</b>		b. TYPE OF CERTIFICATE ISSUED <b>See Remarks</b>																																											
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>U.S. Naval Reserve Manpower Center, Bain., Md. 21905</b>		15. REENLISTMENT CODE <b>RE-1</b>																																													
	16. TERMINAL DATE OF RESERVE/ UMT&S OBLIGATION <b>17 JAN 71</b>		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		b. TERM OF SERVICE (Years) <b>Four</b>	c. DATE OF ENTRY <b>18 JAN 65</b>																																										
18. PRIOR REGULAR ENLISTMENTS <b>None</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>SR</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Chicago, Illinois</b>																																												
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>Chicago, Illinois</b>		22. STATEMENT OF SERVICE																																														
23a. SPECIALTY NUMBER & TITLE <b>RM 0000/0000</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>-193- Radio Operators</b>		<table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td>03</td> <td>09</td> <td>05</td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td>00</td> <td>00</td> <td>00</td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td>03</td> <td>09</td> <td>05</td> </tr> <tr> <td>b. TOTAL ACTIVE SERVICE</td> <td>03</td> <td>09</td> <td>05</td> </tr> <tr> <td>c. FOREIGN AND/OR SEA SERVICE</td> <td>02</td> <td>06</td> <td>15</td> </tr> </tbody> </table>					YEARS	MONTHS	DAYS	(1) NET SERVICE THIS PERIOD	03	09	05	(2) OTHER SERVICE	00	00	00	(3) TOTAL (Line (1) plus Line (2))	03	09	05	b. TOTAL ACTIVE SERVICE	03	09	05	c. FOREIGN AND/OR SEA SERVICE	02	06	15																	
	YEARS	MONTHS	DAYS																																													
(1) NET SERVICE THIS PERIOD	03	09	05																																													
(2) OTHER SERVICE	00	00	00																																													
(3) TOTAL (Line (1) plus Line (2))	03	09	05																																													
b. TOTAL ACTIVE SERVICE	03	09	05																																													
c. FOREIGN AND/OR SEA SERVICE	02	06	15																																													
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>Navy Unit Commendation Ribbon. . . Vietnam Service Medal with Two Bronze Stars. . . Republic of Vietnam Campaign Medal with Device (1960 - ) . . . National Defense Service Medal. . . . .</b>																																																
25. EDUCATION AND TRAINING COMPLETED <table border="0"> <tr> <td>ECC for EMR</td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>ECC for SN</td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>ECC for MRPO 3&amp;2</td> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>RM CLASS "A" SCHOOL</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>							ECC for EMR	<input checked="" type="checkbox"/>						ECC for SN		<input checked="" type="checkbox"/>					ECC for MRPO 3&2			<input checked="" type="checkbox"/>				RM CLASS "A" SCHOOL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>				
ECC for EMR	<input checked="" type="checkbox"/>																																															
ECC for SN		<input checked="" type="checkbox"/>																																														
ECC for MRPO 3&2			<input checked="" type="checkbox"/>																																													
RM CLASS "A" SCHOOL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																																													
	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>																																												
		<input checked="" type="checkbox"/>																																														
26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>TL: None EXLV: None</b>		b. DAYS ACCRUED LEAVE PAID <b>Seven</b>		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>N/A</b>																																										
		28. VA CLAIM NUMBER <b>None</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE																																												
30. REMARKS <b>High School -12 (GED)- Item 11c - expiration of USN contract and concurrent transfer to Naval Reserve Item 13b - NO DISCHARGE CERTIFICATE ISSUED AT TIME OF SEPARATION</b>																																																
31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>2150 South 1st Street San Jose, California 95112</b>		32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Edward D. Price</i>																																														
33. TYPE, NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>F.R. NESTER, CWO-2, USN, PERS. OFF. BY DIRECTION OF THE C.O.</b>		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>F.R. Nester</i> <b>dm N/C</b>																																														