

Bond Safeguard INSURANCE COMPANY

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

BOND NO. 15- 6006510

INDIANA

2002 0193 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.)

KNOW ALL MEN BY THESE PRESENTS:

That we Allied Measurement Systems Corp
(Principal's Name)

PO Box 843, Crestwood, IL 60445
(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 Lake County and/or any unknown third party,

State of Indiana, Obligee, in the aggregate sum of Ten Thousand Dollars (\$ 10000) 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 Servicing and Installing Scales

for the period beginning on the 14 day of February, 2002,

and ending on the 14 day of February, 2003.

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.

This Document is the property of the Lake County Recorder!

Dated this 14 day of February, 2002

Countersigned: Allied Measurement Systems Corp Principal
[Signature] Officer

BY: [Signature] BY: William W. Hector President
BOND SAFEGUARD INSURANCE COMPANY

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 8/14/05

[Signature]
Notary Public, State of Illinois

10 n.h.
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