Western Surety Company

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		ID DEDIKIM DANI	2	œ					
LICENSE AND PERMIT BOND For County, City, Town or Village Only-Not Valid for Bonds Required by the State. Not Valid for Contract, Performance, Maintenance, Subdivision, Agent to Sell Hunting and Fishing Licenses or Utility Guarantee Bond.									
KNOW ALL PERSONS BY T	HESE PRESENTS:		BOND No. L & P-	A. A 12					
That we, Yuan Jun of the <u>City</u> of and WESTERN SURETY (, as Surety, are he	eld and firmly bound	d unto the Count	as Obligee All The					
amount of Ten Thous	and and 00/100	NO MODE THAN \$95.00	DOLLARS U	102000					
bind ourselves and our legal THE CONDITION OF	representatives, firml THIS OBLIGATION	y by these presents. IS SUCH, That whe							
_ as a Home Remodâ				by the Obligee.					
NOW THEREFORE, if nances the hidden all amendr remain in full force and effect and ending on the the Obligee and to the Principal Regardless of the this bond, and the number of be cumulative from year to yexceed the amount set forth Dated this 6th	t for a period commence day of February ated at any time by the acipal at the address lastice or as soon thereafter ety shall be relieved from the relieved	ng on the 6th 2 y , 2006, ur Surety upon sending at known to the Surety approximately approximately approximately and in no event shall che bond amount shall che bond amount shall che	day of Februa: nless renewed by continuous in writing by From the expiration of the expiration of the expiration of the surety's total limit.	the laws and ordi- e void, otherwise to ry , 2006, nuation certificate. irst Class U.S. Mail on of thirty-five (35) r is later, this bond or omissions of the laims made against of liability shall not					
Countersigned (where response) By STATE OF SOUTH DAKO COUNTY OF MINNEHAH	Resident Agent ACKNOWLI	WESTER By EDGMENT OF SUR Corporate Officer)		or Vice President					
On this da appeared Paul T. Bruf COMPANY, a corporation,	ly of, who acknowle and that he as such offi in contained, by signin COF, I have hereunto so	dged himself to be the cer, being authorize g the name of the cet my hand and office	ial seal.	he foregoing instru- las such officer.					

day of	Filed	Address	State of Name of Applicant		AS	mit No	Western Surety Company			
Notary Public					VISCOS NEST	S 3 M WHOLEN				
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self as such officer.	ւ թչ բլացել,րեւ	юізвтодто	o ant to ama	ng the na	uea oy signi	m contai	Poses utere			
going instrument for the pur-	ecuted the fore	CUIII	oa bəzirodtı	ns gniəd	or —— Jo Journal officer	e se se se s	and that he			
ledged himself/herself to be the	, who acknow	OFI	FICIA	AL!		арреагеd	personally a			
eight mo										
	the Lake						COUNTY			
My Commission Expires 05/19/2008			ss				STATE OF			
Motary Public, State of Indiana County of Lake My Comprission Expires 05/10/2000		esiffO ets:								
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the foregoing instrument and	Apo executed	a pur ui								
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hefore me personally appeared	9006	יציא	in <i>Ferrum</i>	—— qs <i>ì</i> , c	L	-	sidt aO			
				- 1	_97	уу — 40	COUNTY			
	<i>(~</i> − −		ss (H/VY)	<i>0712</i> 3	STATE O			
ACKNOWLEDGMENT OF PRINCIPAL (Individual or Partners)										
	S OLOFST BUNDI		<u>. </u>							

Prescribed by the State Board of Accounts (2005)

County form 170

Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury: unty Recorder.

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Digital of Declarati

Printed Name of Declarant