

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

AMERICAN STATES INSURANCE COMPANY

2006 015121

2006 FEB 27 AM 9:23
Surety upon

a certain Bond No. **6213215**

MIDLAND BROWN
FEB 27 2006

dated effective **August 7 2003**
(MONTH-DAY-YEAR)

on behalf of **ALL SEASONS ELECTRIC INC.**
(PRINCIPAL)

and in favor of **BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE, STATE OF INDIANA, AND ANY CITIES AND TOWNS IN LAKE COUNTY, INDIANA**
(OBLIGEE)

does hereby continue said bond in force for the further period

beginning on **August 7 2005**
(MONTH-DAY-YEAR)

and ending on **August 7 2006**
(MONTH-DAY-YEAR)

Amount of bond **FIVE THOUSAND DOLLARS** (\$5,000)

Description of bond **ELECTRICAL CONTRACTOR**

Premium: **\$50.00**

PROVIDED: That this continuation certificate does not create a new obligation and is executed upon the express condition and provision that the Surety's liability under said bond and this and all Continuation Certificates issued in connection therewith shall not be cumulative and that the said Surety's aggregate liability under said bond and this and all such Continuation Certificates on account of all defaults committed during the period (regardless of the number of years) said bond had been and shall be in force, shall not in any event exceed the amount of said bond as hereinbefore set forth.

Signed and dated on **June 8 2005**
(MONTH-DAY-YEAR)
AMERICAN STATES INSURANCE COMPANY
PO Box 34526, Seattle, WA 98124-1526 1-888-844-2663

By Mike McGavick
Mike McGavick President

MCELDOWNEY AGENCY LTD
Agent
PO BOX 168, OLYMPIA FLDS, IL 60461
Address of Agent
708-481-1999
Telephone Number of Agent



\$12
CB
CAN

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 hereby affirm under the penalties of perjury:

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.



Bradley J. Borst
Signature of Declarant

BRADLEY J BORST
Printed Name of Declarant