

Western Surety Company

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 Bor

VNOW ALL DEDGONG DAMBURGE DESCRIPTION	4.0.0.0.4.0.0
KNOW ALL PERSONS BY THESE PRESENTS:	BOND No. L&P- 43282102
That we, Russell C. Jensen	▲ ▲
of the <u>City</u> of <u>Hobart</u>	State of Indiana
and WESTERN SURETY COMPANY, a corporat	, State of <u>Indiana</u> , as Principal, ion duly licensed to do surety business in the State of
Indiana as Surety are hel	d.and firmly hound unto the Board of Commiss coners
I the County of Lake, State of Indiana an	State of State of Towns in
(Valid only when a County, City,	dand firmly bound unto the Board of Commiss forests. John Chiles of Towns in the State of Commiss forests. John Chiles of Towns in the State of Commiss forests. Town or Village is named as Obligee)
amount of Five Thousand and 00/100	DOLLARS (\$ 5000,00 DOLLARS (\$ 50
(NOT VALID FOR	MORE THAN \$25,000)
lawful money of the United States, to be paid to the	Ohligee for which navmont well and truly to be
ond ourselves and our legal representatives, firmly	by these presents
THE CONDITION OF THIS OBLIGATION IS	SUCH, That whereas, the Principal has been licensed
Tuck Point and Restoration	
	by the Obligee.
NOW THEREFORE, if the Principal shall faithfu	lly perform the duties and some lessell, it is a
nances (activing an amendments), pertaining to the li	cense or permit, then this obligation to be void atherwise to
remain in full force and effect for a period commencing	on the 18th day of March 2006
and ending on the day of January	on the 18th day of March 2006, unless renewed by continuation certificate.
	Dentity through condition and an area and a first through the condition and the cond
	s permitted by applicable law, whichever is later, this bond any liability for any subsequent acts or omissions of the
this bond, and the number of premiums which shall be	payable or paid, the Surety's total limit of liability shall not
be cumulative from year to year or period to period, an	d in no event shall the Surety's total limit of liability shall not bond amount shall not be cumulative.
exteed the amount set forth above. Any revision of the	bond amount shall not be cumulative.
Dated this 18th day of March	
	0 1110
	Runell C Jensen
	Principal
The state of the s	The state of the s
Countersigned (where required)	Principal WESTERN SURETY COMPANY
	WESTERN SURETY COMPANY
By An Busyeld	By and // Smilet
Resident Agent	Senior Vice President
	MENT OF SURETY
STATE OF SOUTH DAKOTA	orate Officer)
COUNTY OF MINNEHAHA \(\right\) ss	MANUTE OF THE PARTY OF THE PART
On this 18th day of March	2006 hafana da a a a a a a a a a a a a a a a a a
appeared Paul T. Bruflat who asknowledges	bimself to be the eferencial off a CANDON PROPERTY OF THE CANDON PRO
COMPANY, a corporation, and that he as such officer,	himself to be the aforesaid officer of WESTERN SURETY being authorized so to do, executed the foregoing instru-
IN WITNESS WHEREOF, I have hereunto set m	y hand and official seal.
_ S. EICH	\sim \sim \sim \sim \sim \sim
SEAL NOTARY PUBLIC SEAL SOUTH DAKOTA	- $ -$
*****	Notary Public, South Dakota
My Commission Expires February 12, 2009 Form 849A – 3-2004	Western Surety Company • 101 S. Phillips Ave.
ONO COMPANY OF THE STREETY COMPANY OF THE ORDER OF THE OR	Sioux Falls, SD 57104 • 1-605-336-0850
ONE OF	A MERICA S OLDEST BONDING COMPANIES (SICHCHOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCO
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QQQQQQQQQQQQQQQ	Approved this	Filed	Address	State of Name of Applicant	of	As	LICENSE AND PERMIT BOND	License or Permit No	Western Surety Company
Notary Public					·	_	res	dxə uoi	My commiss
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——————————————————————————————————————	he foregoing	executed	ouw bas	scribed in	səp —lsu	biviba	t ethe	ot e	known to m
sonally appeared	, before me per	9 00C '		ss {_	day of	S	2 Sept	26 V S	STATE OF COUNTY OF On this
ACKNOWLEDGMENT OF PRINCIPAL (Individual or Partners)									

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:

- 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.

Signature of Declarant

Printed Name of Declarant