

**Continuation Certificate**

OBLIGEE COPY

BD OF COMM OF CO OF LAKE-ST IN  
ANY CITIES/TOWNS IN LAKE CTY  
2293 N MAIN ST  
CROWN POINT, IN 46307

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2293 N MAIN ST  
CROWN POINT, IN 46307

WB Index: NLD0489034

BOND NUMBER: 0489034

Bond Description: A license and permit bond

Principal: BELLE ENGINEERING INC  
26W161 PLANK RD  
NAPERVILLE, IL 60564

2009 027848

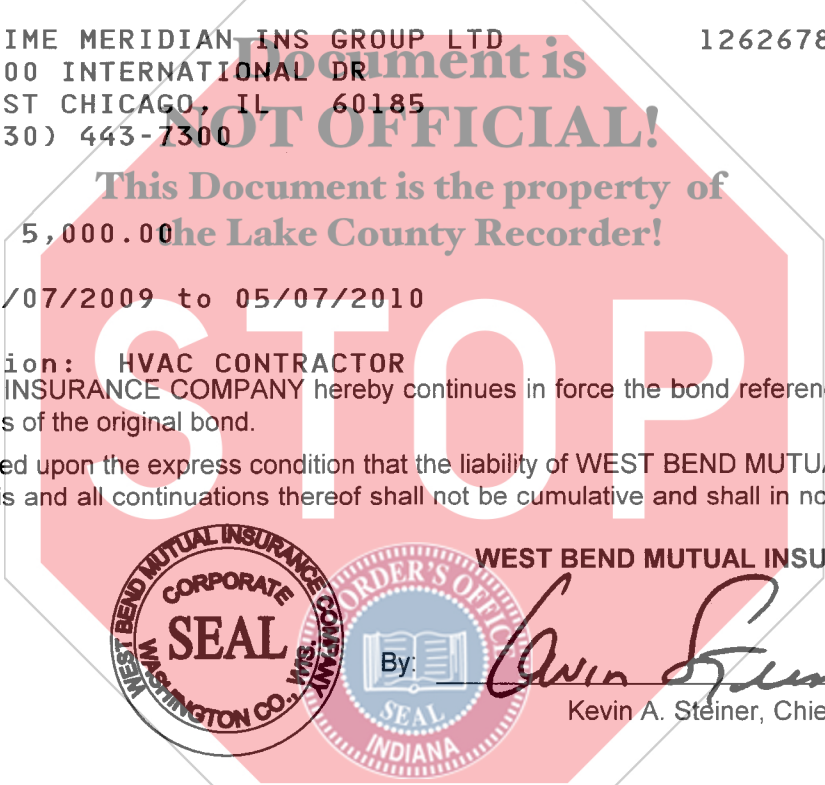
Agent: PRIME MERIDIAN INS GROUP LTD 1262678  
2700 INTERNATIONAL DR  
WEST CHICAGO, IL 60185  
(630) 443-7300

Bond Sum: 5,000.00

Bond Term: 05/07/2009 to 05/07/2010

Work Description: HVAC CONTRACTOR  
WEST BEND MUTUAL INSURANCE COMPANY hereby continues in force the bond referenced above, subject to all the covenants and conditions of the original bond.

This continuation is issued upon the express condition that the liability of WEST BEND MUTUAL INSURANCE COMPANY under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.



STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2009 APR 29 AM 9:42  
MICHAEL BROWN  
RECORDER



WEST BEND MUTUAL INSURANCE COMPANY

By:

*Kevin A. Steiner*

Kevin A. Steiner, Chief Executive Officer

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.  
Power of Attorney is on page 2.

Dated this 06 day of April, 2009.

MICHIGAN ONLY: This policy is exempt from filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236.

NB 0029 03 09

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\$14  
CK# 21137  
CAX



On the 1st day of March, 2009, before me personally came Kevin A. Steiner to me known, who being by my duly sworn, did depose and say: that he resides in the County of Washington, State of Wisconsin; that he is the Chief Executive Officer of WEST BEND MUTUAL INSURANCE COMPANY the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal, that it was so affixed by order of the Board of Directors of said corporation and that he signed his name thereto by like order.

STATE OF WISCONSIN  
County of Washington

*John F. Duwell*  
\_\_\_\_\_  
John Duwell (Notary Public)

*My Commission is permanent.*

