

Principal: (Full name and address)

AMAION: HOLLIN POUNT OR RECORD

Bond Number 0833662

027426 2011 MAY 17 A License and Permit Bond ates of Illihols, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Ohio and Wisconsin only) For County, City, Town or Village Only – Not valid for bonds required by the State. Not valid for Contract, Performance Maintenance, Subdivision, Supply or Utility Guarantee Bond.

Obligee: (Principal's customer)

Bd of Comm of Co of Lake-St IN, any cities/towns in Lake Cty Procare Services Inc et. al. 2293 N Main St 10882 McKinley Hwy Crown Point, IN 46307 Osceola, IN 46561 5/16/2011 5/16/2012 **Expiration Date:** Effective Date: (Valid up to 3 years) PENAL AMOUNT OF BOND (Not valid for more than \$25,000): Dollars (\$ 5,000.00 Five thousand dollars and 00/100 lawful money of the United States, to be paid to the said obligee, for which payment well and truly to be made we bind ourselves and our legal representative, jointly and severally. The condition of this obligation is such, that whereas, the principal has been licensed by the Obligee for: Landscaping NOW, THEREFORE, if said Principal shall faithfully perform all the duties and comply with the laws and ordinances, (including all amendments) pertaining to the license or permit, then this obligation to be void; otherwise to remain in full force for not more than 36 consecutive months, unless renewed by continuation certificate. This bond may be terminated at any time by the Surety upon sending notice in writing to the Obligee and at the expiration of thirty-five (35) days from the mailing of notice or as soon thereafter as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall be relieved from any liability for any subsequent acts or omissions of the Principal. Principal's company shall save and keep harmless the Obligee from all losses or damage which it may sustain or for which it may become liable on account of the issuance of said license and permit. The maximum liability shall not exceed the bond penalty. Signed with our hands and sealed with our seals this, the 20 11 Chief Executive Officer (Principal) On the 1st day of March, 2009, before me personally came Kevin A. Steiner to me known, who being by me 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 er i i was affixed by order of the Board of Directors of said corporation and that he signed his name thereto by like order. STATE OF WISCONSIN John Duwell (Notary Public) PUBLIC County of Washington My Commission is permanent. OF MISC MICHIGAN ONLY: This policy is exempt from the filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218 and MCL 500.2236. NB 0054 03 09 Page 1 of 1 8401 Greenway Blvd. Suite 1100 | Middleton, WI 53562 | Phone: (608) 410-3410 | Fax: (877) 674-2663 | www.wbmi.com

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