Federated Mutual Insurance Company CONTINUATION CERTIFICATE

IN CONSIDERATION of the payment of a	premium of \$ <u>75.00</u>				
Federated Mutual Insurance Company	hereby continues in force to	12-31-2013			
its bond No. 2065522 effective	01/12/10	, in the sum of			
FIVE THOUSAND AND NO/100		Dollars (\$5,000.00), on behalf of			
WILLIAM VENESS DBA WAVE ENTERPR	RISES	0			
	· · · · · · · · · · · · · · · · · · ·	2			
represented by (if applicable)		, Principal, in favor of			
THE BOARD OF COMMISSIONERS OF 1	THE COUNTY OF LAKE, STATE	OF INDIANA AND ALL CITIES,			
TOWNS AND MUNICIPALITIES IN LAKE	COUNTY, INDIANA	56			
Obligee subject to all its terms, conditions	and limitations as set forth and ex	pressed in said borle?			
This certificate is executed upon the express condition that the Company's liability under said bond and this and all continuation certificates issued in connection therewith shall not be cumulative, and shall not in any event exceed the amount set forth in said bond, or said amount as it may have been increased or decreased by any rider(s) or endorsement(s) properly issued by the Company.					
Dated this 26TH day of the I Federated Mutual Insurance Company By MICHELLE KRAAY	Attorney-in-Fact				
* IF RENEWAL NOT DESIRED, PLEASE RETURN ORIGINAL CONTINUATION CERTIFICATE WITH POWER OF ATTORNEY WITHIN 30 DAYS FOR CANCELLATION.					
RE 22 Ed 02.08	EAL MOIANA MANAGEMENT OF THE PARTY OF THE PA	AMOUNT \$ 10 2 C CASHCHARGE CHECK # 13 12 1 DVERAGE # 1 COPY NON-COM CLERKU			

BF-22 Ed. 02-08

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That FEDERATED MUTUAL INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of Minnesota, and having its principal office in the City of Owatonna, State of Minnesota, does hereby constitute and appoint:

	MICHELLE KRAAY	of the City of	OWATONNA	State
of	MINNESOTA	its true and lawful	attorney for the following purpor	ses:
bonds	To sign its name as surety to, and penalties not exceeding:	and to execute, affix the s	seal, acknowledge and deliver ar	ny and all surety
	ONE HUN	DRED THOUSAND DOLLA	ARS (\$100,000) EACH	
WILLIA	AM VENESS DBA WAVE ENTE	RPRISES CROWN POIN	T, IN	

The execution of such bonds or undertakings in pursuance of these presents shall be binding upon the Company as if they had been executed and acknowledged by the regularly elected officers of the Company.

This Power of Attorney granted by Federated Mutual Insurance Company shall terminate when the designee ceases to be:

- 1) Employed by Federated Mutual Insurance Company or
- 2) Employed by Federated Mutual Insurance Company in a job for which such Power of Attorney is required.

IN WITNESS WHEREOF, the said FEDERAFED MUTUAL INSURANCE COMPANY has caused this instrument to be signed and its corporate seal to be affixed by its Executive Vice President and Assistant Secretary this the 12TH day of FEBRUARY , 2007

(SEAL)

FEDERATED MUTUAL INSURANCE COMPANY

Kelly J Hagen

BY

Executive Vice Presiden

and BY

Assistant Segretary

STATE OF MINNESOTA COUNTY OF STEELE

On this 12TH day of FEBRUARY, 2007 personally appeared before me, the undersigned notary public, Sarah L Buxton and Gregory J Stroik to me personally known, who, each being duly swom by me, did say that they are respectively the Executive Vice President and Assistant Secretary of the FEDERATED MUTUAL INSURANCE COMPANY and that the seal affixed to this instrument is the corporate seal of said Corporation and that this instrument was signed and sealed of behalf of said Corporation by authority of its Board of Directors and said Sarah L Buxton and Gregory J Stroik acknowledge said instrument to be the free act and deed of said corporation.

KELLY J. HAGEN
NOTARY PUBLIC - MINNESOTA
My Commission Expires Jan. 31, 2010

(SEAL)

COPY OF RESOLUTION

"BE IT RESOLVED that the President or any Vice President in conjunction with the Secretary is hereby authorized and empowered under the corporate seal of the Company, to appoint any person or persons as attorney or attorneys-in-fact, or agent or agents of the Company, in its name and as its act to execute and deliver, anywhere in the United States or Canada, any and all bonds and undertakings of suretyship and other documents that the ordinary course of surety business may require."

"BE IT FURTHER RESOLVED that the Power of Attorney or other document appointing such person or persons as attorney or attorneys-in-fact or agent or agents of the Company may either be personally signed by the President, any Vice President, the Secretary or may be executed by said officers by means of facsimile signatures. The said personal signatures or facsimile signatures shall not require the Company seal or any other seal and shall be valid and binding on the company if executed either by personal signature or facsimile signature and with or without the Company seal being affixed thereto."

I, the undersigned, hereby certify that I am an Executive Vice President of the FEDERATED MUTUAL INSURANCE COMPANY, a Corporation duly organized and existing under the laws of the State of Minnesota and that the foregoing is a true and complete copy of the original Power of Attorney given by said Company to:

MICHELLE KRAAY	of	OWATONNA, MINNESOTA
authorizing and empowering such person to been revoked and is still in full force and effe		s therein set forth, which Power of Attorney has never
meeting of the Board of Directors of said Co Owatonna, Minnesota on the 20 th day of Apr	mpany duly ca il, 19 <u>82</u> at whi	given in pursuance of a resolution adopted at a regular lled and held at the office of the Company in the City of ch meeting a quorum was present and that the foregoing
is a true and correct copy of said resolution, a	and the whole t	hereof as recorded in the minutes of the said meeting.
		Insurance Company, Article 8, Section 1; in the absence ormed by the Assistant Secretaries in the order of their
IN TESTIMONY WHEREOF, I had MUTUAL INSURANCE COMPANY this the		et my hand and affixed the seal of the FEDERATED day of NOVEMBER, 2012
(SEAL)	SEA MOIA	DERATED MUTUAL INSURANCE COMPANY
	Ex	Secutive Vice President