Master Plumber Code Compliance Continuation Bond (To be completed by your Surety Company.)

The \$40 filing fee must be submitted with this bond, made payable to the Minnesota Department of Health. Checks returned for nonpayment will be charged a \$20 fee (M.S. 332.50, subd. 2). A Certificate of Insurance may be submitted. An Acord form or any other certificate of insurance will not be accepted.

	LARRY BRE	DAHL enter the plumb	ving company na	ime)			Bond No	9330586
					1 200			
Address 7916 - 73RD	AVEN	BROOKLYN		55428-		71	()	C0010
	DDEDAUL	DILIMDING	City		State	Zip	Phone No.	56789101173
Plumbing Company Name	Type or Print. N	PLUMBING		vious vens				6300
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Address 7916 - 73RD	AVE N	BROOKLYN	PARK MN	55428-	1280		().	NOVECEIVED
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Date Original Bond Issued	12	31 /	1999 i	n the amou	nt of \$2	5,000 as r	equired by sta	itutes.
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Surety Company Name Fl		MUTUAL INS	SURANCE C	OMPANY	PAGE 1	3		
Тур	e or Print							
Address 121 EAST PAI	RK SQUARE	Maria Maria	OWAT	ONNA	MN	55060	(507)45	55-5200
Street			City		State	Zip	Phone No.	
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RETURN: Bond form, certificate of insurance (if sumbitted) and \$40 filing fee to:

Plumbing Program

P.O. Box 64975 St. Paul, MN 55164-0975

(651)215-0836

INNESOTA

DEPARTMENT OF HEALTH

Minnesota Department of Health

121 East Seventh Place, Suite 220

0104037

MOV 0 8 2001

Office use only: Fee: 40.00

Deposit Date:

Deposit No.:

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

LISA ROUSHAR	of the City of	OWATONNA	State
ofMINNESOTA	its true and law	vful attorney for the	following purposes:
	and to execute, affix the	ne seal, acknowledg	e and deliver any and all surery
bonds and penalties not exceeding:			
ONE HUNDRED THOUSAND DO	LLARS (\$100,000) E	ACH	
BREDAHL PL	UMBING INC (LA	RRY BREDAHL)	BROOKLYN PARK MN
The execution of such bonds	or undertakings in nur	snance of these pre	sents shall be binding upon the
Company as if they had been executed			
This Power of Attorney gran	nted by Federated Mut	nal Insurance Com	pany shall terminate when the
designee ceases to be:	31.9610		
1) Employed by I	ederated Munial Insura	nce Company or	
2) Employed by	Federated Munual Insu	rance Company in	a job for which such Power of
Attorney is req			
IN WITNESS WHEREOF, the			
this instrument to be signed and its of Secretary this the 22ND.			ve Vice President and Assistant 2000
	FEDE	RATED MITTIAL	INSURANCE COMPANY
Sales of the sales	and the state of the state of the	50	B4+
(SEAL)	BY_	executive Vice President	dent
	and BY	~	
Same and the second		Assistant Secretary	
STATE OF MINNESOTA			
COUNTY OF STEELE			
	NE 2000 per	consilis anneared her	fore me, the undersigned notary
On this 22ND day of JUI public, Sarah L Buxton and David W R			

KELLY J. HAGEN.
NOTARY PUBLIC-MINNESOTA
MY COMMISSION EXPIRES 1-31-2005

Kelly J. Hagen

corporation.

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:

LISA ROUSHAR	_ of	OWATONNA	A, MINNE	SOTA	
authorizing and empowering such person to sign been revoked and is still in full force and effect.	n bonds a	s therein ser	forth, w	hich Power o	f Attorney has neve
I further certify that said Power of Attorneeing of the Board of Directors of said Compar Owatonna, Minnesota on the 20th day of April 19 is a true and correct copy of said resolution, and the PURSUANT to the By-Laws of Federate of inability of the Secretary to act, his duties sharank.	ny duly co 82 at whi he whole	alled and held ich meeting a thereof as red Insurance Co	i at the or quorum corded in ompany,	Tice of the Co was present a the minutes o	ompany in the City of and that the foregoing of the said meeting.
IN TESTIMONY WHEREOF, I have h MUTUAL INSURANCE COMPANY this the	ereunto s 15			october	
	FI	EDERATED	MUTUA	L INSURAN	CE COMPANY

(SEAL)

Executive Vice President