Donald Bing Pm 001237

## NAME OR ADDRESS RIDER

To be atta	ached to and form a part of Bor	nd Number _	9183435		dated the	31ST	day of
	DECEMBER	, 19 <u>90</u>	on behalf of	E A H SCHM	IDT AND	ASSOCIATES	INC
issued by	THE FEDERATED MUTUAL INS	URANCE CO	MPANY, Owatonna	, Minnesota, in favo	r of the _	MN DEPT O	F HEALTH
100	PLUMBING UNIT	Th	is bond is hereby	corrected subject to	its terms,	conditions and I	imitations
from:	3241 WINPARK DR						
	NEW HOPE MN 55427						
to:	3245 WINPARK DR						
	NEW HOPE MN 55427						
Effective t	the 23RD day of	JULY		, 19 <u>9</u> 2			
	SEALED AND DATED this 23R		day of	JULY		, 19 92	

FEDERATED MUTUAL INSURANCE COMPANY

Attorney-in-Fact



White: Obligee's Copy Canary: Principal's Copy Pink: Division Office Copy Goldenrod: MR Copy STATE OF MINNESOTA'
DEPARTMENT OF STATE
FILED

JUL 30 1992

Joan anderson Grove

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