

**MASTER PLUMBER CONTINUATION BOND
(TO BE COMPLETED BY BONDING AGENCY)**

NAME OF MASTER PLUMBER Wayne Dauwalter BOND NO. RLI 370946
ADDRESS 15525 Green Meadow Circle Carver, MN 55315
(Street) (City) (State) (Zip)
TELEPHONE NO. (612) 448-6636

DATE ORIGINAL BOND ISSUED 12/31/88 in amount of \$2,000 as stated
in Minnesota Statutes 326.40 (1978).

NAME OF BONDING COMPANY Old Republic Surety Company
ADDRESS P. O. Box 1976 Des Moines, Iowa 50306
(Street) (City) (State) (Zip)

Complete this part only if a company name and address were provided on the original bond.

NAME OF PLUMBING FIRM Wayne Dauwalter Plumbing
ADDRESS 15525 Green Meadows Circle Carver, MN 55315
(Street) (City) (State) (Zip)
TELEPHONE NO. (612) 448-4763

The bond described above, and to which this certificate is attached, is hereby continued
in force from the date of last renewal for an extended term ending the 31st day of
December 19 95.

Dated this 4th day of November, 19 94.

X

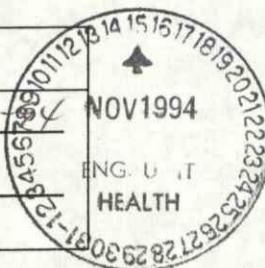
MASTER PLUMBER SIGNATURE

S. Lowe
(Authorized Signature)
Attorney-In-Fact
Old Republic Surety Company
(Name of Surety Company)

COPIES OF THIS BOND FORM WILL NOT BE ACCEPTED

A FILING FEE OF \$40.00 MADE PAYABLE TO MINNESOTA DEPARTMENT OF HEALTH
must be submitted with the bond to the Minnesota Department of Health
Plumbing Unit, 925 Delaware St. S.E., P.O. Box 59040, Minneapolis, MN 55459-0040

FOR OFFICE USE ONLY	
License No. <u>PM003350</u>	Renewal <u>11-15-94</u>
Fee <u>\$40 CCR 7995</u>	Dep. No. _____



FILED
NOV 18 1994
Joan Anderson Howe
Secretary of State

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