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

22-00686

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.

Master Plumber Name Ronald Rwilke Bond No. 68980275 Type or Print (do not enter the plumbing company name)
Address 45105 CtyRD35 Deev River MW 5689218) 832-3082 Street City State Zip Phone No.
Plumbing Company Name Type or Print. Must be the same as filed the previous year.
Address 45105 Cty RD 35 DeuRios mN 54636(218) 832-3082 Street (Must be the same as filed the previous year.) City State Zip Phone No.
Date Original Bond Issued 03 / 13 / 00 in the amount of \$25,000 as required by statutes.
Surety Company Name WESTERN SURETY COMPANY Type or Print
Address 101 South Phillips Ave. Sioux Falls SD 57104-6703 (605) 336-0850 Street City State Zip Phone No.
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 December 31, 2001.
Dated this 5th day of December , 2000. WESTERN SURETY COMPANY
Master Plumber's Signature State of Minnesota COUNTY OF Authorized Signature of Surety Authorized Signature of Surety
Subscribed and sworn before me 12,20,00
Notary Public My commission expires TIMOTHY J SWANSON NOTARY PUBLIC MINNESOTA TASCA COUNTY Notice to Individual Applicants: Winder Mission 22018 17, 2005 Notice to Individual Applicants: Winder Mission 22018 17, 2005 Notary Public Notary Pu
become public, except your social security number.
Notice to Corporate Applicants: Under Minnesota Statutes 13.41, all data submitted in this application are public, except for the social security number of any responsible person, which is private.
If you require this document in another format, such as large print, Braille, or cassette tape, call (651)215-0700 (651)215-0707 or for Greater Minnesota through the Minnesota Relay Service at (800)627-3529 and ask for (651)215-0700 (651)215-0707
RETURN: Bond form, certificate of insurance (if sumbitted) and \$40 filing fee to: Minnesota Department of Health Plumbing Program Office use only: Fee: 40.001cck/2/180
Plumbing Program 121 East Seventh Place State 220 P.O. Box 64975 Deposit Date: JAN 10 2001
DEPARTMENT OF HEALTH St. Paul, MN 55164-1075 (651)215-0836 Deposit No.: 114



POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

М.	Anaws	ki			of	Sioux	Falls			
State	of Sc	outh	Dakota		, its regular	ly elected	Assist	ant Secr	etary	
										dge and deliver fo
and o	n its be	half as	Surety and as	its act and deed	I, all of the fo	llowing cla	asses of do	cuments to-	wit:	
equity fidelity waiver	, policies bonds, s to mod nands m	inden inden dify or o	nifying employer	s against loss or o where indemnity any bond or docu	damage cause may be lawful	d by the m ly given; a	isconduct o	f their employ power and au	ees; official athority to e	in any court of law o , bail, and surety and xecute consents and tle any and all claims
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officers appoir corpor	rate riam s as the nt Attorno rate seal	e of the Board eys-in-f is no	e Company by the Directors may a fact or agents what necessary for the Company of the Company for the Company	ne President, Secr authorize. The Pre no shall have auth	retary, any Ass esident, any Vid ority to issue y bonds, polic	sistant Seci ce Presiden bonds, pol cies, under	retary, Treas nt, Secretary icies, or und takings, Po	surer, or any any any any Assistan dertakings in wers of Attor	Vice President Secretary, the name of	be executed in the ent, or by such other or the Treasurer may f the Company. The er obligations of the
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STATE	E OF SC	DUTH	DAKOTA)							
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