

Code Administration and
Inspection Services
443 Lafayette Road
St. Paul, Minnesota 55155-4304



PROOF OF BOND

(612) 296-4530 Boiler Inspection
(612) 296-2193 High Pressure Piping
(612) 296-1140 Fax
STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED

JAN 18 1995

Jon Andrus
Secretary of State

This is to certify that **HUBERT J. KRAMER** Contracting Pipefitter License No. **88124** Representing **H. J. KRAMER PLUMBING & HEATING, INC.** has filed a \$2,000 bond with the Secretary of State on **NOVEMBER 23, 1994**, and provided evidence of Public Liability Insurance, including Products Liability Insurance of at least \$50,000 per person and \$100,000 per occurrence and Property Damage Insurance of at least \$10,000 for the year of **1995** in accordance with the provisions of Minnesota Statutes 326.48 Subdivision 2.

BOND NO. BD 7900548166

BONDING CO. ALLIED MUTUAL INSURANCE CO.

INS. POLICY NO. 22-C 042760

INS. CO. MILWAUKEE INSURANCE CENTER

Ryna J. Bloom

Ryna J. Bloom
Administrative Assistant
High Pressure Piping
(612)296-2193

THIS FORM MAY BE COPIED AND SUBMITTED TO EACH LOCALITY IN WHICH YOU ARE BIDDING.

LI-52529-03(7/92)

An Equal Opportunity Employer



9500385

CONTINUATION BOND FORM
(to be attached to original bond form)

BOND NO. BD 7900548166

*Bond fee
\$151.45
100*

NAME OF MASTER STEAMFITTER H.J. Kramer Plumbing & Heating, Inc.

ADDRESS 30 Liberty Street Winona Minnesota 55987
(street) (city) (state) (zip)

TELEPHONE NO. 507 454 1551

ORIGINAL DATE BOND ISSUED December 31, 1992 IN THE AMOUNT OF \$2000 as stated in Minnesota Statutes 326.48 Subd. 2

NAME OF BONDING COMPANY ALLIED Mutual Insurance Company

ADDRESS 701 5th Ave., Des Moines, IA 50391-2006
(street) (city) (state) (zip)

NAME OF STEAMFITTING FIRM H.J. Kramer Plumbing & Heating, Inc.

ADDRESS 30 Liberty Street Winona MN 55987
(street) (city) (state) (zip)

TELEPHONE NO. 507 454 1551

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 1995.

Dated this 31st day of Des Moines, 1994

H.J. Kramer Plumbing & Heating, Inc.

Principal

Principal

ALLIED Mutual Insurance Company

(Surety Company)

By

John Bednarz Attorney-in-Fact

FOR OFFICE USE ONLY

License No.

Registration No.

License Renewal Date

Power of Attorney

KNOW ALL MEN BY THESE PRESENTS That ALLIED Mutual Insurance Company, a corporation organized under the laws of the State of Iowa, with its principal office in the City of Des Moines, Iowa, hereinafter called "Company", does hereby make, constitute and appoint PAUL H. STRAYER
BEN HOPKINS
JOHN BEDNARZ
ERIC C. MAHNKE
JOHN F. COLEMAN

DES MOINES, IA

each in his individual capacity, its true and lawful Attorney-In-Fact with full power and authority to sign, seal, and execute in its behalf any and all bonds and undertakings and other obligatory instruments of similar nature (except bonds guaranteeing the payment of principal and interest of notes, mortgage bonds and mortgages) in penalties not exceeding the sum of

FIVE MILLION AND NO/100 DOLLARS

(\$ 5,000,000.00)

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority hereby given are hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the following By-Laws duly adopted by the Board of Directors of the Company.

ARTICLE 7 EXECUTION OF CONTRACTS

"Section 7.4 Instruments Issued by the Corporation. Bonds, undertakings, and other obligatory instruments of similar nature, other than insurance policies and insurance endorsements, issued by the Corporation shall be validly executed and binding on the Corporation when signed by the President or a Vice President or by the Attorney(s)-In-Fact appointed by the President or by a Vice President."

"Section 7.5 Appointment of Agents. The President or a Vice President shall have the power to appoint agents of the Corporation, or other persons, as Attorney(s)-In-Fact to act on behalf of the Corporation in the execution of bonds, undertakings, and other obligatory instruments of similar nature, other than insurance policies and endorsements, with full power to bind the Corporation by their signature and execution of any such instrument. The appointment of such Attorney(s)-In-Fact shall be accomplished by Powers of Attorney signed by the President or the Vice President."

This Power of Attorney is signed and sealed by facsimile under and by the following By-Laws duly adopted by the Board of Directors of the Company.

ARTICLE 7 EXECUTION OF CONTRACTS

"Section 7.6 Verifications. The Secretary, or any Assistant Secretary, is authorized to certify that any such Power of Attorney signed is validly executed and binding on the Corporation and to certify that any bond, undertaking, or obligatory instrument of similar nature, other than insurance policies and endorsements, to which the Power of Attorney is attached is and shall continue to be a valid and binding obligation of the Corporation, according to its terms, when executed by Attorney(s)-In-Fact appointed by the President or Vice President."

"Section 7.7 Use of Corporate Seal. It shall not be necessary to the valid execution and binding effect on the Corporation of any bond, undertaking, or obligatory instrument of similar nature, other than insurance policies and endorsements, signed on behalf of the Corporation by the President or a Vice President, or Attorney(s)-In-Fact appointed by the President or a Vice President, or of any Power of Attorney executed on behalf of the Corporation appointing Attorney(s)-In-Fact to act for the Corporation, or of any certificate to be executed by the Secretary or an Assistant Secretary, as hereinabove in Sections 7.4, 7.5, and 7.6 provided, that the corporate seal be affixed to any such instrument, but the person authorized to sign such instrument may affix the corporate seal. A facsimile corporate seal affixed to any such instrument shall be as effective and binding as the original seal."

"Section 7.8 Other Facsimile Signatures. A facsimile signature of the President or of a Vice President affixed to any bond, undertaking, or obligatory instrument of similar nature, other than policies and endorsements, or to a Power of Attorney signed by such President or a Vice President, as herein in Sections 7.4 and 7.5 provided, or a facsimile signature of the Secretary or of an Assistant Secretary to any certificate as herein in Section 7.6 provided, shall be effective and binding upon the Corporation with the same force and effect as the original signatures of any such officers."

"Section 7.9 Former Officers. A facsimile signature of a former officer shall be of the same validity as that of an existing officer, when affixed to any insurance policy or insurance endorsement, any bond or undertaking, any Power of Attorney or certificate, as herein in Sections 7.1, 7.2, 7.4, 7.5, and 7.6 provided."

IN WITNESS WHEREOF, the Company has caused these presents to be signed by its Vice President and its corporate seal to be hereunto affixed this 10 day of JULY, 1992

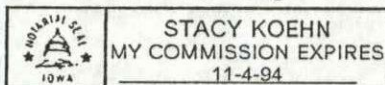
ALLIED MUTUAL INSURANCE COMPANY

By: *Paul H. Strayer* Vice President

STATE OF IOWA
COUNTY OF POLK ss



On this 10 day of JULY, 1992, before me personally came Paul H. Strayer, to me known, who, being by me duly sworn, did depose and say that he is Vice President of ALLIED Mutual Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of said corporation, that the seal affixed to said instrument is such corporation seal; that it was so affixed pursuant to authority given by the Board of Directors of said corporation and that he has signed his name thereto pursuant to like authority, and acknowledged the same to be the act and deed of said corporation.



Stacy Koehn
Notary Public in and for the State of Iowa

CERTIFICATE

I, the undersigned, Secretary of ALLIED Mutual Insurance Company, a corporation organized under the laws of the State of Iowa, do hereby certify that the foregoing Power of Attorney is still in force, and further certify that Sections 7.4 through 7.9 inclusive of Article 7 of the By-Laws of the Company set forth in said Power of Attorney are still in force.

IN TESTIMONY WHEREOF, I have subscribed my name and affixed the seal of the company
this 31st day of December, 1994

06711

This Power of Attorney expires
07/10/95



Secretary

Acknowledgment of Attorney-in-Fact



Insurance

STATE OF Iowa

SS.

COUNTY OF Polk

On this 31st day of December 19 94, before me, a Notary Public, within and for said County and State, personally appeared John Bednarz to me personally known, and known to me to be the Attorney-in-Fact of and for ALLIED MUTUAL INSURANCE COMPANY, Des Moines, Iowa, a corporation, created, organized and existing under and by virtue of the laws of the State of Iowa, upon oath did say that the corporate seal affixed to the attached instrument is the seal of the said Company; that the seal was affixed and the said instrument was executed by the authority of its Board of Directors; and he did also acknowledge that he executed the said instrument as the free act and deed of said Company.



Patricia M. Vermace

Notary Public.

April 25, 1997



CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

11/21/94

PRODUCER

☐ Ringler Insurance Center
909 W. 5th, PO Box 1244
Winona, MN 55987

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER **A** Milwaukee Insurance CenterCOMPANY LETTER **B** State Fund Mutual Ins. Co.COMPANY LETTER **C**COMPANY LETTER **D**COMPANY LETTER **E**

INSURED

H.J. Kramer Plumbing & Heating, Inc.
PO Box 43
Winona, MN 55987

COVERAGES

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
A	GENERAL LIABILITY	22-C 042760	3/25/94	3/25/95	GENERAL AGGREGATE	\$1,000,00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OPS AGGREGATE	\$1,000,00
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE				PERSONAL & ADVERTISING INJURY	\$1,000,00
	OWNER'S & CONTRACTORS PROTECTIVE				EACH OCCURRENCE	\$1,000,00
					FIRE DAMAGE (ANY ONE FIRE)	\$ 100,00
					MEDICAL EXPENSE (ANY ONE PERSON)	\$ 5,00
A	AUTOMOBILE LIABILITY	22-C 042760	3/25/94 3/25/94	3/25/95	CSL	\$1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (PER PERSON)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (PER ACCIDENT)	\$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	<input type="checkbox"/> GARAGE LIABILITY					
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE	\$
B	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	009875.201	3/25/94	3/25/95	STATUTORY X	
					\$100,000	(EACH ACCIDENT)
					\$500,000	(DISEASE-POLICY LIMIT)*
	OTHER				\$100,000	(DISEASE-EACH EMPLOYEE)

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS
* Policy Limit Applies to Accident and Disease.

CERTIFICATE HOLDER

Department of Labor & Industry
Code services, High Pressure Piping
443 Lafayette Road
St. Paul, MN 55155-4304

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE