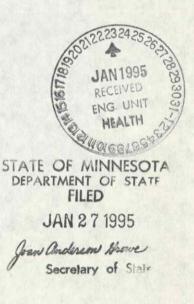
Pm003978 Thomas H. Elender

NAME OR ADDRESS RIDER

To be attached to and form a part of Bond Number	er9207442	dated t	he day of
DECEMBER , 19	92 on behalf of _E	ELANDER MECHANICAL	INC
issued by THE FEDERATED MUTUAL INSURANCE			MN DEPT OF HEALTH -
from: 2915 133RD ST W SHAKOPEE	E MN 55379		
to: <u>591 CITATION DR SHAKOPEE N</u>	<u>1N 55379-1888</u>		
Effective the 1ST day of	DECEMBER	, 1994	
SIGNED, SEALED AND DATED this	day ofDECEN	MBER	_ , 19 <u>_94</u>

FEDERATED MUTUAL INSURANCE COMPANY

ion march Attorney-in-Fact



White: Obligee's Copy Canary: Principal's Copy Pink: Division Office Copy Goldenrod: MR Copy