NAME OR ADDRESS RIDER

To be attached to and form a part of Bond Number			9183553		dated the day of		
<u></u>	NOVEMBER		_ on behalf of	JOHN ADELMAN	N PLUMBIN	1G	
issued by TH	E FEDERATED MUTUAL IN	ISURANCE COM	IPANY, Owatonna	i, Minnesota, in favo	or of the MI	INNESOTA D	DEPT
OF HEALTH	H, PLUMBING UNIT	This	s bond is hereby	corrected subject t	o its terms, c	conditions and	l limitations
from: JC	OHN ADELMANN PLUMB	ING	(JOH	N ADELMANN, M	ASTER PLU	JMBER)	N 199
	Start Start						
to: PF	RIOR LAKE PLUMBING	, JOHN ADE	LMANN DBA	(JOHN ADELMA	NN, MASTE	ER PLUMBER	R)
			-282	See.			
Effective the	1ST day o	f APRIL		, 19 92			
SIGNED, SEA	LED AND DATED this 19	т	day of	APRIL		19 ⁹²	

FEDERATED MUTUAL INSURANCE COMPANY

Attorney-in-Fact

STATE OF MINNESOTA DEPARTMENT OF STATE FILED

APR 2 7 1992

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