Master Plumber Code Compliance Continuation Bond

(To be completed by your Surety Company.)

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 Gerald Bergstro			Bond No	69267772
Type or Print (do not enter the pl	umbing company name)	2. N . W		T X
Address of the Control of the Contro			()	700
Address	City	State Zip	Phone No.	24501081072
Plumbing Company Name Bergstrom Plum				12 1
Type or Print. Must be the	same as filed the previous year			The Man
		t		856-98983
Address 26020 104th St., Zimmermar	n, MN 55398	Cel	(612) 2:	21-0805
Street (Must be the same as filed the previous year.)	City	State Zip	Phone No.	OF STATE ARY
Date Original Bond Issued 01 / 28	/ 02 in the an	nount of \$25,000 as	required by sta	atutes. 232 42 EZ ZZ 1200
Surety Company Name WESTERN S	SURETY COMPANY			
Type or Print	THE RESERVE TO LE			
Address 101 S. Phillips Ave., Sid	oux Falls, SD 57	104-6703	(605)	336-0850
Street	City	State Zip	Phone No	Charles Name of the Control
Dated this26th day of September		WESTERN SI	RETY COMPAN	TV
your rogh ss	7cm.			
Master Plumber's Signature		Surety Company Nam	11	
536		1/ 1/ 1/	Votom	H. Dahlstrom, Ass't Sec
COUNTY OF Henreper		Authorized Signa	ature of Surety	
Subscribed and sworn before me		land Area de		
Subscribed and sworn before me	Lum	**********		
many & Dockerty	11117 103	MARY E DOC NOTARY PUBLIC - N	HERTY MINNESOTA	
Notary Public Date	005	HENNEPIN C	OUNTY RES 1-31-2005	
My commission expires / 13/ 12	COS CONSIST	opposences/v/bo34s	(coccocco)	
Notice to Individual Applicants: Under Minnesota application are considered private until you are is become public, except your social security number	sued a credential. When	except your name you become creder	and address, su stialed, all data	bmitted in this in this application

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, TDD (651)215-0707 or for Greater Minnesota through the Minnesota Relay Service at (800)627-3529 and ask for (651)215-0700.

RETURN: Bond form, certificate of insurance (if sumbitted) and \$40 filling fee to:



Minnesota Department of Health Plumbing Program 121 East Seventh Place, Suite 220 P.O. Box 64975 St. Paul, MN 55164-0975 (651)215-0836

Office Use Only Deposit Date:	y: Fee:	40.00	2003 PCK	16517
Deposit No.:	- 1	00	-	

Western Surety Company

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

H. Dahlstrom	of Sioux Falls
State of South Dakota	, its regularly elected Assistant Secretary
as Attorney-in-Fact, with full power and author	ly hereby conferred upon him to sign, execute, acknowledge and deliver for
and on its behalf as Surety and as its act and de	ed, all of the following classes of documents to-wit:
equity, policies indemnifying employers against loss fidelity bonds. Indemnity in all cases where indemni	desired by contract, or may be given in any action or proceeding in any court of law or damage caused by the misconduct of their employees; official, bail, and surety and ity may be lawfully given; and with full power and authority to execute consents and cument executed for this Company, and to compromise and settle any and all claims or
Western Surety Company further certifies that Company duly adopted and now in force, to-wit:	ne following is a true and exact copy of Section 7 of the by-laws of Western Surety
corporate name of the Company by the President, Sofficers as the Board of Directors may authorize. The may appoint Attorneys-in-Fact or agents who shall ha	Powers of Attorney, or other obligations of the corporation shall be executed in the ecretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other e President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer e authority to issue bonds, policies, or undertakings in the name of the Company. The conds, policies, undertakings, Powers of Attorney or other obligations of the corporation and may be printed by facsimile.
	SURETY COMPANY has caused these presents to be executed by its
	corporate seal affixed this 26th day of September
2003	
ATTEST	WESTERN SURETY COMPANY
a. Vieror	111/1/
Accietan	Secretary Paul T. Bruflat. Senior Vice President
Assistan	Secretary Paul T. Bruflat, Senior Vice President
STATE OF SOUTH DAKOTA	
COUNTY OF MINNEHAHA	
On this 26th day of September	
Paul T. Bruflat	and A. Vietor
who, being by me duly sworn, acknowledged that and Assistant Secretary, respectively, of the sai the voluntary act and deed of said Corporation.	t they signed the above Power of Attorney as Senior Vice President d WESTERN SURETY COMPANY, and acknowledged said instrument to be
+ % % % % % % % % % % % % % % % % % % %	
D. KRELL	
SEAL NOTARY PUBLIC SEAL S	
SOUTH DAKOTA	De Frell
+ 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	Notary Public
My Commission Expires November 30, 2006	Notary Public