



Certificate of Premium Payment

This certifies the employer listed below has paid into the Ohio State Insurance Fund as required by law. Therefore, the employer is entitled to the rights and benefits of the fund for the period specified. For more information, call 1-800-OHIOBWC.

This certificate must be conspicuously posted.

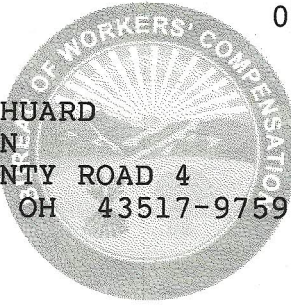
Policy No. and Employer

Period Specified Below

793726

07/01/2014 THRU 02/28/2015

ROGER A HUARD
GUTTERMAN
6133 COUNTY ROAD 4
EDGERTON OH 43517-9759



Stephen Buchner
Administrator/CEO

ohiobwc.com

You can reproduce this certificate as needed.