

9-1476 (9-87)

BOND OF NOTARY PUBLIC STATE-AT-LARGE

		04/20/1593-10855
The State of Alabama		10:27 AM CERIATAN
SHELBY	Caunty	SHELBY COUNTY JUDGE OF PROBAIL
	County	002 MCD 15.00
Know All Men By These Pres		
THAT WE,Maryant		AS PRINCIPAL
in the sum of TEN THOUSAN	D AND NO/100 (\$10,000.00	URETY and held and firmly bound unto the State of Alabama) Dollars, for the payment of which well and truly to be made nistrators, and assigns, firmly by these presents.
THE CONDITION OF TH	E ABOVE OBLIGATION IS	SUCH, That whereas, the above bound PRINCIPAL was, on
the12th day of	Apri1	, A.D., 19 appointed Notary Public, State-at-large.
		rm and discharge all the duties of said office during the time void, otherwise to remain in full force and effect.
		Sealed with our seals and dated this $\frac{12 \mathrm{th}}{2}$ day of
	۱ ۱	PRINCIPAL:
Approved and ordered of	f Record this \(\frac{\firec{\frac{\fint}{\fint}}}}}}{\frac{\fir\fir\f{\frac{\fir\fir\f{\frac{\frac{\frac{\frac{\frac{\frac{\f	BY Maryann I. Walters
of	Q	AMERICAN STATES INSURANCE COMPANY
There are from	grand and the state of the stat	BY: Joyce L. Lynold
Judge of Probate Court	Shelly_County	ATTORNEY-IN-FACT Joyce R. Reynol Countersigned by: Alabama Resident Agent Joyce R. Reynolds
	OATH C)F OFFICE
THE STATE OF ALABAMA		
SHELBY	_County	Probate Court
,	rvann L. Walters	•
solemnly swear that I will sup	port the Constitution of the hereof, and that I will hones	United States, and the Constitution of the State of Alabama, tly and faithfully discharge the duties of the office upon which God.
Subscribed and sworn to	before me this 12th	
day of April		\
April Mal	Facino	Maryan & Walters
Notary F	Publicmy Combassion Expires Feb. 26, 1	Maryann L. Walters Principal
Filed in the office of the judg	e of Probate Court, this	1 day of
		Judge of Probate CourtCounty
Recorded in Official Bond Re	ecord	, Page
		and the second of the second o



American States Insurance Company

INDIANAPOLIS, INDIANA

KNOW ALL MEN BY THESE PRESENTS, that American States Insurance Company, a Corporation duly organized and existing under the laws of the State of Indiana, and having its principal office in the City of Indianapolis, Indiana, hath made, constituted and appointed, and does by these presents make, constitute and appoint. ----- J. GARY YARBROUGH, JOYCE R. REYNOLDS OR DONNA F. LEEMON ------Alabama Birmingham ____ and State of _ its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, contracts of indemnity and other conditional or obligatory undertakings. provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed FIVE HUNDRED THOUSAND AND NO/100 (\$500,000.00) DOLLARS -----and to bind the Corporation thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the common seal of the Corporation and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. This Power of Attorney is executed and may be revoked pursuant to and by authority granted by Section 7.07 of the By-Laws of the American States Insurance Company, which reads as follows: "The Chairman, the President or any Vice-President (including any Executive Vice-President, Senior Vice-President, Second Vice-President or Assistant Vice-President) shall have power, by and with the concurrence with any other officer of the Corporation, to appoint Attorneys-in-fact as the business of the Corporation may require and to authorize any such person to execute, on behalf of the Corporation, any bonds, recognizances, stipulations and undertakings, whether by way of surely or otherwise" IN WITNESS WHEREOF, American States Insurance Company has caused these presents to be signed by its Vice-President, attested by its Assistant Vice-President and its corporate seal to be hereto affixed this 6th AMERICAN STATES INSURANCE COMPANY A.D. 19 92 ATTEST: Assistant Vice-President STATE OF INDIANA COUNTY OF MARION A.D., 19 92 , before me personally came May 6th day of On this to me known, who Joseph F. Heim being by me duly sworn, acknowledged the execution of the above instrument and did depose and say; that he is a Vice-President of American States insurance Company; that he knows the seal of said Corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of the Board of Directors of said Corporation; and that he signed his name thereto under like authority. And said John J. Rosich and knows him to be the Joseph F. Heim further said that he is acquainted with... Assistant Vice-President of said Corporation; and that he executed the above instrument. KATHLEEN FORD, NOTARY PUBLIC JOHNSON COUNTY, STATE OF INDIANA MY COMMISSION EXPIRES: 12/2/94 STATE OF INDIANA COUNTY OF MARION John J. Rosich , the Assistant Vice-President of AMERICAN STATES INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, which is still in force and effect. This Certificate may be signed and sealed by facsimile under and by the authority of Section 8.03 of the By-Laws of AMERICAN STATES INSURANCE COMPANY which reads as follows: "All policies and other instruments of insurance issued by the Corporation shall be signed on behalf of the Corporation by the Chairman, the president or any vice-president (including any Executive Vice-President, Senior Vice-President, Vice-President, Second Vice-President, or Assistant Vice-President) and the secretary, assistant secretary, or other officer, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimilies. Such signatures and facsimiles thereof shall be authorized and binding upon the Corporation notwithstanding the fact that any such officer shall have ceased to be such officer at the time such policy or other instrument of insurance shall have been actually issued by the Corporation." In witness whereof, I have hereunto set my hand and affixed the seal of said Corporation, this $\frac{12 {
m th}}{12}$ A.D., 19___93 Inst # 1993-10855

04/20/1993-10855

Assistant Vice-President

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENTEPRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — PRESENT IN ITS ENTIRETY. IF YOU HAVE ANY QUESTIONS REGARDING THE VALIDARY OF THIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIS, IN 46206-1636.