of Montgomery  Its rue and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge 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 hereund shall not exceed FIVE HUNDRED THOUSAND AND NO/100 (\$500,000.00) DOLLARS				<u> </u>				
of Montgomery and State of Alabama  is true and lawful Attorney(s)-in-Fact, with full power and authority helieby conferred in its name, place and stead, to execute, acknowledge 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 hereund and bonds necessary and the Copporation hereby as July and to the same excent as at authority or penal sum of any one such instrument executed hereund and bonds were sipped by the President executed of the Common is a continued and any one such instrument executed and the same excent as at authority granted by Section 7.07 of the By-Laws of the American Sinsurance Company, which reads as follows:  The Chairman of the Board, the President or any Vice-President shall have power by and with the concrimence with the Secretary or any Assistant Secretary of the Corporation production of authority any one of such persons 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 Assistant Secretary and its corporate seal to be hereto affixed this Other Corporations.  Assistant Secretary and its corporate seal to be hereto affixed this Other President Assistant Secretary of the Corporation 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 Assistant Secretary and its corporate seal to be hereto affixed this Other President of the Corporation of the Assistant Secretary and its corporation of the Assistant Secretary of Assistant Secretary and the Corporation of the Assistant Secretary of Assistant Secretary o			SYLVIA	HALL			<u> </u>	
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and to bind the Corporation thereby as fully and to the same extent as it such bonds were signed by the President, settled on the Corporation and duly attested by its Secretary, hereby raithing and confirming all that the said Attorney's in-Pact may do in the premises. 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 S insurance Company, which reads as solows.  The Chairman of the Board, the President part of the Corporation, to appoint Resident Vice-Presidents. Resident Assistant Secretary is an Assistant Secretary of the Corporation, any board, by and with the concurrence with the Secretary or any Assistant Secretary is an Assistant Secretary in the Corporation, any board, secognizances, stipulations and undertakings, whether by way of surety or otherwise. In WITNESS WHEREOF, American States Insurance Company has caused these presents to be signed by its Vice-President, attested Assistant Secretary and its corporate seal to be hereto affixed this STATE OF INDIANA.  Assistant Secretary and its corporate seal to be hereto affixed this STATE OF INDIANA.  Assistant Secretary and its corporate seal to be hereto affixed this.  Assistant Secretary and its corporate seal to be hereto affixed this.  Assistant Secretary and its corporate seal to be hereto affixed this.  Assistant Secretary and its corporate seal to be hereto affixed this.  Assistant Secretary and its corporate seal to be hereto affixed this.  Assistant Secretary and its corporation and the short instrument and did depose and say; that he is a Vice-President of American States Insurance Company, that he knows the seel of said Corporation; that the seal affixed to the said instrument is such corporate seat; that so affixed by authority of the Board of Directors of said Corporation; and that he seal affixed to the said instrument is such corporate seat; that so affixed by authority of the Board of Directors of said Corporation; and that he sacquainted with the said situati	_							
A. D. 19 81  STATE OF ALA SHELET  Assistant Secretary  SERVING THIS SECRET THIS  STATE OF INDIANA COUNTY OF MARION  SS:  88 HAY 24 AH II: 01  On this 6th day of FROMATION  Assistant Secretary  BONAP 24 AH II: 01  On this 6th day of FROMATION  Assistant Secretary  BONAP 24 AH II: 01  Assistant Vice-President  Assistant Secretary  Assistant Secretary  Assistant Secretary  Assistant Secretary of said Corporation; and that he is acquainted with Thomas M. Ober and knows him to MY COMMISSION EXPIRES  JANUARY 19, 1983  STATE OF INDIANA  COUNTY OF MARION  SS:  Thomas M. Ober the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby continue and other instruments of the Secretary of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, do hereby continue and other instruments of insurance issued by the Corporation shall be signed on behalf of the Corporation by the president or a vice-president and the escretary or an assistant secretary, whose signatures if the instrument is duly countersigned by an authorized representative of 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.	and to bind the Corporat the Corporation and duly Power of Attorney is exe Insurance Company, wi "The Chairmal Secretary or ar and Attorneys-	ion thereby as fully and attested by its Secreta- ecuted and may be revo- high reads as follows: n of the Board, the Pre- ny Assistant Secretary of in-Fact as the business	to the same extent as try, hereby ratifying and oked pursuant to and I esident or any Vice-P of the Corporation, to recognizances, stigut	al such bonds wild confirming all to by authority graders and the appoint Resident appoint Resider and the lations and under the confirming and the lations and under the confirming and the lations and the confirming all th	ere signed by the hat the said Attornated by Section 7 have power, by a nt Vice-President authorize any or ertakings, whether	ney(s)-in-Fact (.07 of the By- and with the co ts. Resident A ne of such per er by way of s	area with the co may do in the p Laws of the Am oncurrence with ssistant Secreta sons to execute urety or otherw	remises. erican St the aries e, on ise"
Assistant Secretary of Said Corporation; and that he executed the above instrument.  MY COMMISSION EXPIRES  JANUARY 19 1983  STATE OF INDIANA COUNTY OF MARION  Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby certifulate above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, which reads as follows:  Thomas M. Ober, the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby certifulate in the said of the activation of the said on the said on the said on the said on the said instrument is such corporate seat; that so affixed by authority of the Board of Directors of said Corporation; and that he signed his name thereto under like authority. And the said affixed to the said instrument is such corporate seat; that so affixed by authority of the Board of Directors of said Corporation; and that he signed his name thereto under like authority. And Assistant Secretary of said Corporation; and that he executed with Thomas M. Ober and knows him to the said and	Assistant Secretary and	its corporate seal to b	be hereto affixed this	6th	day of	Febru	nary	
Assistant Secretary of Said Corporation; and that he executed the above instrument.  MY COMMISSION EXPIRES  JANUARY 19. 1983  STATE OF INDIANA COUNTY OF MARION }  SS:  88 MAY 24 AM II: 01  On this 6t.b day of FROBATE  Alanson T. Abe1 , to me known being by me duly sworn, acknowledged the execution of the above instrument and did depose and say; that he is a Vice-President of Am States insurance Company; that he knows the seal of said Corporation; that the seal affixed to the said instrument is such corporate seal; that so affixed by authority of the Board of Directors of said Corporation, and that he signed his name thereto under like authority. And Alanson T. Abe1 further said that he is acquainted with Thomas M. Ober and knows him to a My Commission Expires  JANUARY 19. 1983  WY Commission Expires  STATE OF INDIANA SS:  1. Thomas M. Ober the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby 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:  "INSURANCE COMPANY which reads as follows:  "It is president or a vice-president and the secretary or an assistant secretary, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimiles. 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.	A D 10 81		STATE OF AL	S. \$651.85	AMERICAN \$	TATES INSUF	RANCE COMPA	ANY
Assistant Secretary  Assistant Secretary  Assistant Secretary  BS MAY 24 AM II: 01  On this 6tth day of FEBFRATY AM II: 01  On this 6tth day of FEBFRATY AM II: 01  Alanson T. Abel to me known being by me duly sworn, acknowledged the execution of the above instrument and did depose and say, that he is a Vice-President of Am States insurance Company; that he knows the seal of said Corporation; that the seal affixed to the said instrument is such corporate seal; that so affixed by authority of the Board of Directors of said Corporation; and that he signed his name thereto under like authority. And Assistant Secretary of said Corporation; and that he executed the above instrument.  MY COMMISSION EXPIRES  JANUARY 19: 1983  STATE OF INDIANA COUNTY OF MARION SS:  1. Thomas M. Ober the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby 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.  "All policies 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 insurance issued by the Corporation shall be signed on behalf of the Corporation by the president or a vice-president and the secretary or an assistant secretary. Such signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be established. 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."		/	TCERT	IFY THIS			T	///
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Assistant Secretary of said Corporation; and that he executed the above instrument.  MY COMMISSION EXPIRES  JANUARY 19. 1983  My Commission Expires  STATE OF INDIANA COUNTY OF MARION  SS:  Thomas M. Ober, the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby certified above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, is still in full 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 president or a vice-president and the secretary or an assistant secretary, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimiles. 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."  16th February	Otalas Laurence Como	anurthal ha knowe the (	CHIETARAN, JANES IA IBAG	MU INAL IIIM SENLA	aniama au intersaio	II ISH WHITEH IN IO C	,00:100:00:00	
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STATE OF INDIANA COUNTY OF MARION  1. Thomas M. Ober , the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby certified above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, is still in full 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 ST 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 president or a vice-president and the secretary or an assistant secretary, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimiles. 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."  16th February		NUARY 19. 1983			Sehoras		MATE.	
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In witness whereof, I have hereunto set my hand and affixed the search said corporation, this	"All policies a president or countersigned	d by an authorized repr	resentative of the Corp	poration, may be ithetanding the fa	ACI IIIAL <b>AIIV</b> BULII	UINCOLDINE!! 116	110 000000 10 4	such
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(SEAL)

Form \$- (459 (8-80)