

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA

PUBLIC OFFICIAL BOND

EX 838 207

	DONG MUHID	er
· · · · · · · · · · · · · · · · · · ·	e That wa W Paul Yeager	
KNOW ALL MEN BY THESE PRESENTS	s, mai we	in the State of
	OI	in the State of
	al, and AMERICAN STATES INSURANCE (·
organized and existing under and by virtue of		
n the State of Alabama	, as Surety, are held and firmly bo	ound unto
Shelby County		· · · · · · · · · · · · · · · · · · ·
n the State of <u>Alabama</u> Three Thousand and no/100—————		$\frac{1}{\sqrt{6}}$, in the full and just sum of $\frac{1}{\sqrt{6}}$
awful money of the United States, for paymen		ourselves, our neirs, executors,
idministrators, successors and assigns, joint	ly and severally, liftily by these presents.	
NOVED AND OF ALEBANIA 10th	November	A.D. 19
SIGNED AND SEALED this10th	day of	A.D. 19
W. Paul Yeag	zer	
Wheneas, the salu		
nas been duly elected or appointed to the obeginning on the 10th day of day of	November	19 for a term
peginning on the total day of	November	<u> </u>
ending on theday of		, 19
•	THE ABOVE OBLIGATION IS SUCH, that if t	
he aforesaid term, faithfully and truly perforn	n all the duties of said office as required by	law, then this obligation to be
oid, otherwise to be and remain in full force	e and virtue.	
IN WITNESS WHEREOF, the said Princip	al has hereunto set his hand and the said AM	IERICAN STATES INSURANCE
COMPANY has caused these presents to be		
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//(Ma)/ 128//	areo x/w/cm/	/ W7
A	WITNESS	PRINCIPAL
		· · · · · · · · · ·
	AMERICAN STATES INS	URANCE COMPANY
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	- Comment	(Cello)
		. ATTORNEY-IN-FACT
	•	
STATE OF Alabama		
ALCOCATIO.	SS.:	
COUNTY OF Cholby		
Shelby	•	
Before me, this <u>10th</u> day of	November	A.D., 19 <u>9</u>
personally appeared the said W. Paul	Yeager	, to me known
and known to me to be the individual describ	ped in and who executed the foregoing bone	•
hathe executed the same.		/
		1/2/5
4 1992-26612	Mull	Melos
Inst # 1992-26612		
20-26612		
0-1013 (3-89)11/13/1992-26612 OB: D2 AM CERTIFIED OB: D2 AM CERTIFIED	· . I	
OB = OZ AM CERT PROBATE	· · ·	
HINGE UP FROM		

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WARNING



American States Insurance Company

INDIANAPOLIS, INDIANA

constitute and appointGF	ORGE T. BEN	TLEY OR SUE WAL	TON	
	SOLUTE I - LIEV.	LIBI ON DOD WELL		
Columbiana		nd State of	Alabama	
its true and lawful Attorney(s)-in-Fact, with full p	ower and authority he	ereby conferred in its nam		ute, acknowledge and
deliver any and all bonds, recognizances, contracts	of indemnity and oth	er conditional or obligatory	undertakings, provide	d, however,
that the penal sum of any o	ne such inst	rument executed	d hereunder shall	not exceed
THREE HUNDRED THOUSAND AND				
and to bind the Corporation thereby as fully and to the and duly attested by its Secretary, hereby ratifying an and may be revoked pursuant to and by authority gra "The Chairman, the President or any Vice-P or Assistant Vice-President) shall have power as the business of the Corporation may re recognizances, stipulations and undertaking	d confirming all that the inted by Section 7.07 or resident (including any by and with the concurrence and to authorize is, whether by way of	said Attorney(s)-in-Fact may the By-Laws of the America Executive Vice-President, rence with any other officer any such person to execusurety or otherwise"	do in the premises. This Power on States Insurance Company, Senior Vice-President, Second of the Corporation, to appoint Aste, on behalf of the Corporation.	of Attorney is executed which reads as follows: Vice-President Attorneys-in-fact on, any bonds,
IN WITNESS WHEREOF, American States II				
Assistant Vice-President and its corporate seal to	be hereto affixed this		September	
A.D. 19 91		AMERICAN STATES I	NSURANCE COMPANY	
\		· · · · · · · · · · · · · · · · · · ·		
d		A Some	147)	•
ATTEST:Assistant Vice-President		_ Bŷ	Second Vice-President	<u> </u>
Assistant Vice-i resident				ATTES IN
STATE OF INDIANA				(S)
COUNTY OF MARION SS	Carry Com			OF SHOW
•			. 01	
On this 4th day of	Septem	ber	, A.D., 19 <u>91</u> , before	me personally came
	Joseph F	. Heim	,	. to me known, who
Assistant Vice-President of said Corporation: ar	cution of the above in seal of said Corporat rectors of said Corporat said that he is acqua-	estrument and did depose on; that the seal affixed to tration; and that he signed inted with John when the above instrument.	o the said instrument is such do his name thereto under like and and	resident of American n corporate seal; tha e authority. And said knows him to be the
CYNTHIA MCMILLIN, NO MARION COUNTY, STAT		Chitte	ia MCTA	illi
MARION COUNTY OF EXP	RES: 12/10/91		Notary Public	ay s
WIT COMPANIES				(3)
STATE OF INDIANA		•		Z De a
COUNTY OF MARION				NOIA
the above and foregoing is a true and correct copies still in force and effect.	by of a Power of Attor	ney, executed by said AMI	ERICAN STATES INSURANC	CE COMPANY, Which
This Certificate may be signed and sealed INSURANCE COMPANY which reads as follow	s:	•		
"All policies and other instruments of insurant the president or any vice-president (including or Assistant Vice-President) and the secretary by an authorized representative of the Corp binding upon the Corporation notwithstanding or other instrument of insurance shall have	nce issued by the Co any Executive Vice-F r, assistant secretary, oration, may be facs ng the fact that any s	President, Senior Vice-Presor or other officer, whose sig milies. Such signatures a uch officer shall have cea	sident, Vice-President, Secor natures, if the instrument is d and facsimiles thereof shall b	nd Vice-President, uly countersigned se authorized and
In witness whereof, I have hereunto set m	y hand and affixed t	he seal of said Corporation	on, this day of	
A.D., 19 <u>92</u>			•	LES INS
J- 6		1992-26612		1860
		1995	0	[3 (3 06)
	T was the T	<i>_</i> _	1.7	FO F.MWT

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENT PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATEMENT PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATEMENT PRINTED IN THE MARGIN HEREOF IN YOU HAVE ANY QUESTIONS REGARDING THE VALIDITAN OF CIVIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIDE 46206-1636 OF PROBATE OF PRO

Assistant Vice-President