

9-1476 (9-87)

BOND OF NOTARY PUBLIC STATE-AT-LARGE

Inst # 1993-01180

BOND NO. EX-875-569

The State of Alabama		- 493-01180
THE State of Alabama		01/13/1993-01180 12:01 PM CERTIFIED
SHELBY	County	12:01 PROBATE
	•	SHELBY COUNTY JUDGE OF PROBATE ODE NCD 15.00
Know All Men By These P	resents	005 W. r.
THAT WE, MILDRED	R. SAMBOR	AS PRINCIPAL
		S SURETY and held and firmly bound unto the State of Alabama
	•	.00) Dollars, for the payment of which well and truly to be made
and done, we bind ourselv	es, our heirs, executors, adi	ministrators, and assigns, firmly by these presents.
THE CONDITION OF		IS SUCH, That whereas, the above bound PRINCIPAL was, on
the <u>11th</u> day of	December	, A.D., 19_92 appointed Notary Public, State-at-large.
		rform and discharge all the duties of said office during the time be void, otherwise to remain in full force and effect.
		Sealed with our seals and dated this $\frac{11 \mathrm{th}}{2.2}$ day of
		<u>December</u> ,A.D., 1992
		PRINCIPAL:
Approved and ordered	d of Record this -13 day	BY Deldud Kambor
of January	201093	Mildred R. Sambor AMERICAN STATES INSURANCE COMPANY
Thomas Ct.	nowder 21993	
Judge of Probate Court	Shally_County	ATTORNEY IN-FACT Joyce R. Reynold Countersigned by: //
Judge of Flobate Court	County	
		Alabama Resident Agent Joyce R. Reynolds
•		Alabama Resident Agent Joyce R. Reynolds
THE STATE OF ALABAMA		OF OFFICE
SHELBY	County	Probate Court
l,	D R. SAMBOR	, do
		he United States, and the Constitution of the State of Alabama,
		nestly and faithfully discharge the duties of the office upon which
I am about to enter, to the	e best of my ability, so help	me Goa.
Subscribed and sworn	to before me this 11th	
Thomas	, 19	
day of December		
Drange 1-1	Mouse	To ildred & Sambor
Notar Notar	y Public My semmission cripi	Principal Mildred R. Sambon
	MA ESUMISSION CAP	
Filed in the office of the it	idge of Probate Court, this	13 day of <u>Agricany</u> , 19 <u>93</u> .
	augo or i robate oourt, tino	
		Thomas a. mourden o
		Judge of Probate CourtCounty
Recorded in Official Bond	Record	, Page



American States Insurance Company

INDIANAPOLIS, INDIANA

estitute and appoint J. GARY YARBROUGH, JOYCE	R.	REYNOLDS OR	DONNA	F.	LEEMON
J. Grill Hillottocoll, Golde					
Birmingham	and	State of		\la	bama
the second territor Attaches to East with full power and authority	here	by conferred in its ni	ame, piace	and	stead, to execute, acknowledge and
and the second s		conditional or obligato	rv undertaki	nas.	DIOATGER HOWEVER
at the penal sum of any one such this	,	IIICITE CALCOCO			
VE HUNDRED THOUSAND AND NO/100 (\$500	0,0	00.00) DOLLA	RS		with the common seal of the Corporation
I to bind the Corporation thereby as fully and to the same extent as if such duly attested by its Secretary, hereby ratifying and confirming all that the may be revoked pursuant to and by authority granted by Section 7.07. "The Chairman, the President or any Vice-President (including a or Assistant Vice-President) shall have power, by and with the contast the business of the Corporation may require and to authority recognizances, stipulations and undertakings, whether by way in the WITNESS WHEREOF, American States Insurance Company	me sa 7 of th any E ncurre ize a of su	ne By-Laws of the Amer xecutive Vice-Presider ance with any other office my such person to exe rety or otherwise"	rican States nt, Senior Vicer of the Co ecute, on be	insur ce-Pr rpora shalf	rance Company, which reads as follows: resident, Second Vice-President ation, to appoint Atterneys-in-fact of the Corporation, any bonds,
IN WITNESS WHEREOF, American States Insurance Company	nas	5th day of	113 10 50 5.	g.,	May
sistant Vice-President and its corporate seal to be hereto affixed th	IIS ,	AMERICAN STATE	S INSURA	ICE (
o. 19 <u>92</u>		AMERICANSIAIL	.0 111001111		
		235			1 20 3 4
	d	By //p	resh		- Jem
TEST: Assistant Vice-President	·····		Seco	and V	rice-President
		ľ			
ATE OF INDIANA		Servings.			INDIA
UNTY OF MARION	٠.	•			Siny.
6+h Mar	y	n-	, A.t)., 19	92 , before me personally came
On this day of				·	
Joseph F. Heim					, to me known, wh
ing by me duly sworn, acknowledged the execution of the above ates insurance Company; that he knows the seal of said Corporations of the said Corporation of the said Corporation; and that he executed is sistent Vice-President of said Corporation; and that he executed in the executed said vice-President of said Corporation; and that he executed in the executed in the executed said vice-President of said Corporation; and that he executed in the executed in the executed said vice-President of said Corporation; and that he executed in the executed in the executed said vice-President of said Corporation; and that he executed in the executed in the executed said vice-President of said Corporation; and the executed in the executed said vice-President of said Corporation; and the executed said vice-President of said vic	rpora guair	ation; and that he signed with John	ose and said to the said to th	me t	hereto under like authority. And sai
KATHLEEN FORD, NOTARY PUBLIC		4		,	
OHNSON COUNTY, STATE OF INDIANA		/Ju	inu	Nota	ry Public
MY COMMISSION EXPIRES: 12/2/94				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	S. A. A.
					(ž(Sec
ATE OF INDIANA SS					VOLA
OUNTY OF MARION					an optionably de bareby cortify the
i. <u>John J. Rosich</u> , the Assistant Vice-Preside above and foregoing is a true and correct copy of a Power of Atsitll in force and effect.	ttorne	ey, executed by said	MINITE IIOM		
This Certificate may be signed and sealed by facsimile unde	er and	d by the authority of	Section 8.0	JG Of	THE BY-LAWS OF AIVIENIUMIN STATE
SURANCE COMPANY which reads as follows: "All policies and other instruments of insurance issued by the the president or any vice-president (including any Executive Vice or Assistant Vice-President) and the secretary, assistant secretary and authorized representative of the Corporation, may be for binding spoon the Corporation notwithstanding the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the fact that any process of the corporation is the corporation in the corporation.	ary, c acsir	r other officer, whose hilies. Such signature ch officer shall have	signatures es and fact ceased to	, if th	ne instrument is duly countersigned es thereof shall be authorized and
or other instrument of insurance shall have been actually issu	ueu	by the Corporation.		1	1th Decembe
In witness whereof, I have hereunto set my hand and affixed	ed th	e seal of said Corpo	ration, this		day of
D., 19 <u>92</u> .					STES IN STES IN
			3 1 -	•	12
			بحرر	_	Vice-President

01/13/1993-01180

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENT PRINTED 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 VALIDITY OF THIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIS, IN 46206-1636.