



BOND OF NOTARY PUBLIC STATE-AT-LARGE

EX-876-099

The State of Alabama

Inst. # 1993-19963

SHELBY County

Know All Men By These Presents

07/08/1993-19963
11:22 AM CERTIFIED

SHELBY COUNTY JUDGE OF PROBATE

002 MCD 17.00

THAT WE, Myra Jane Chase AS PRINCIPAL
and **AMERICAN STATES INSURANCE COMPANY**, AS SURETY and held and firmly bound unto the State of Alabama
in the sum of TEN THOUSAND AND NO/100 (\$10,000.00) Dollars, for the payment of which well and truly to be made
and done, we bind ourselves, our heirs, executors, administrators, and assigns, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, That whereas, the above bound PRINCIPAL was, on
the 21st day of June, A.D., 19 93 appointed Notary Public, State-at-large.

NOW, IF THE SAID PRINCIPAL shall faithfully perform and discharge all the duties of said office during the time
he/she continues therein then the above obligation to be void, otherwise to remain in full force and effect.

Sealed with our seals and dated this 21st day of
June, A.D., 19 93

PRINCIPAL:

BY Myra Jane Chase

AMERICAN STATES INSURANCE COMPANY

BY: Donna T. Flemon

ATTORNEY-IN-FACT

Countersigned by: Donna T. Flemon

Alabama Resident Agent

Approved and ordered of Record this 8 day
of July, 19 93

Judge of Probate Court Shelby County

OATH OF OFFICE

THE STATE OF ALABAMA

SHELBY County

Probate Court

I, Myra Jane Chase, do
solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Alabama,
so long as I remain a citizen thereof, and that I will honestly and faithfully discharge the duties of the office upon which
I am about to enter, to the best of my ability, so help me God.

Subscribed and sworn to before me this 21st
day of June, 19 93

Donna Lancaster
Notary Public Commission Expires
5/28/97

Myra Jane Chase
Principal

Filed in the office of the judge of Probate Court, this 8 day of July, 19 93

Judge of Probate Court Shelby County

Recorded in Official Bond Record _____, Page _____



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

of Birmingham and State of Alabama
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, 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 surety 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 day of May, A.D. 19 92
AMERICAN STATES INSURANCE COMPANY

ATTEST:

[Signature]
Assistant Vice-President

By

[Signature]
Second Vice-President

STATE OF INDIANA } SS
COUNTY OF MARION }

On this 6th day of May, A.D., 19 92, before me personally came

Joseph F. Heim

, to me known, who 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

Joseph F. Heim further said that he is acquainted with John J. Rosich and knows him to be the 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

[Signature]
Notary Public

STATE OF INDIANA } SS
COUNTY OF MARION }

I, 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, 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 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."

In witness whereof, I have hereunto set my hand and affixed the seal of said Corporation, this 21st day of June, A.D., 19 93

[Signature]
Assistant Vice-President

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING CERTIFICATE PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — IS NOT 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.

WARNING
THIS IS NOT A VALID POWER OF ATTORNEY IF THIS STATEMENT DOES NOT APPEAR IN RED INK AND IF THE RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — IS NOT PRESENT IN ITS ENTIRETY.

641-473

17.00

002 MCD

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11:22 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE



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