ALLSTATE INSURANCE COMPANY HOME OFFICE - NORTHBROOK, ILLINOIS

THE STATE OF ALABAMA

Bond No. <u>074-019 542</u> SB

NOTARY PUBLIC OFFICIAL BOND

ALPOM001

KNOW ALL MEN BY THESE PRESENTS

| THAT WE, WARREN F. WALKER | <u> </u> |
|---|---|
| as Principal, and ALLSTATE INSURANCE COMPANY | , as Surety are held and firmly |
| bound unto The State of Alabama in the penal sum of *********** | ******* |
| TEN THOUSAND AND 00/100 | (10,000.00 POELARS |
| for which payment well and truly to be made, we bind ourselves, ou | r heirs, executors, and administrators, jointly and severally, |
| firmly by these presents. | 4 2 2 5 € 9 0 2 € |
| Sealed with our seals, and dated this 15th day of November | , A.D. <u>1994</u> |
| THE CONDITION OF THE ABOVI | E OBLIGATION IS SUCH |
| That whereas the above bounden WARREN F. WALKER | |
| That whereas the above bounden WARREN F. WALKER was on the21st day of November ,1994 _ duly appointed to the office of Notary Poster B and for County of STATE-AT-LARGE | |
| County of STATE-AT-LARGE . | AND IN COLUMN IN THE |
| Now, if the said WARREN F. WALKER | 005 NCD 11.00 |
| shall faithfully discharge the duties of such office during the time he/sl | he continues therein, or discharges any of the duties thereof, |
| then this obligation to be void, otherwise to remain in full force and effect for the term of four (4) years from the date of the notary | |
| commission. | PRINCIPAL |
| SIGNED, SEALED AND DELIVERED In Presence of | WARREN F. WALKER Seal |
| Nawyi Catalt | SE INSURAN |
| Countersigned by: Resident Agent | ALLSTATE INSURANCE COMPANY SEAL Attorney-in-Fact, SHARON N. PICOT |
| | |
| Take | en and approved the day of \(\frac{\hat{VQFo}_h \hat{Ver}_\}{\hat{V}} \) |
| | 19 7 4 |
| | Judge of Probate |
| - · · · · · · · · · · · · · · · · · · · | · |
| OATH OF O | FFICE |
| I, WARREN F. WALKER | |
| do solemnly swear (or affirm) that I will support the Constitution of the | |
| so long as I continue a citizen thereof, and that I will faithfully and honestly 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 day of North AD., 19 94 Multiple Multiple Man. | WADDEN E WALVED |
| Notary Public, , Alabama MY COMMISSION E | WARREN F. WALKER XPIRES JULY 1, 1998 |

ALLSTATE INSURANCE COMPANY (A STOCK INSURANCE COMPANY, HEREIN CALLED ALLSTATE OR THE COMPANY)

HOME OFFICE - NORTHBROOK, ILLINOIS

KNOW ALL MEN BY THESE PRESENTS: That All state Insurance Company, a corporation organized and existing under the laws of the State of Illinois, and having its principal office at Allstate Plaza, Northbrook, County of Cook, State of Illinois, does hereby appoint:

LINDA M. BELLAMY, MARILYN S. WALSH, OR SHARON N. PICOT

its true and lawful agents and Attorneys-in-Fact, individually, to make, execute, sign, acknowledge, affix the Company Seal to, and deliver any and all surety bonds, consents, undertakings, and other writings obligatory in the nature of a bond, for and on behalf of said Company and as act and deed of said Company, with a limit not to This authority shall expire without notice at midnight of December 31, 1994, unless revoked sooner in writing. exceed \$ 10.000.00.

This appointment is made under and by authority of the following provision of the By-Laws of the Company which provision is now in full force and effect and is the only applicable provision of said By-Laws.

ARTICLE V. SECTION 1.

All policies of insurance issued by this Company shall comply with the laws of the respective states, territories or jurisdictions in which the policies are issued. All bonds, undertakings, certificates of insurance, cover notes, recognizances, contracts of indemnity, endorsements, stipulations, waivers, consents of sureties, reinsurance acceptances or agreements, surety and co-surety obligations and agreements, underwriting undertakings, and all other instruments pertaining to the insurance business of the Company, shall be validly executed when signed on behalf of the Company by(1)the Chairman of the Board,(2)the President,(3)any Vice President or Assistant Vice President, or (4) any other officer, employe, agent, or Attorney-in-Fact authorized in writing to so sign by the Chairman of the Board, the President, or any Vice President. All policies of insurance shall bear the signature of the President and of the Secretary, which signatures may be facsimiles, and shall be countersigned by a duly licensed resident agent where so required by law or regulation. A facsimile signature of a former officer shall be of the same validity as that of an existing officer.

The affixing of the Company's Seal shall not be necessary to the valid execution of any instrument but the Secretary, any Assistant Secretary, or any officer, employe, agent, or Attorney-in-Fact authorized in writing so to do by the Secretary, any Assistant Secretary, or any Vice President, may affix the Company's Seal thereto.

This Power of Attorney is signed and sealed by facsimile under and by authority of the following Resolution voted by the Board of Directors of Alistate Insurance Company at a meeting duly called and held on the 18th day of December 1970.

BE IT RESOLVED, that the signatures of the President, the Secretary, any Vice President, or any Assistant Vice President, and the seal of the Company may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing Attorneys-in-Fact for the purpose of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such power of attorney or certificate so executed by and bearing such facsimile signature or signatures and facsimile seal shall be valid and binding upon the Company, and in particular, shall be valid and binding in the future with respect to any bond or undertaking or other writing obligatory in the nature thereof to which it is attached for such purpose.

IN WITNESS WHEREOF, ALLSTATE INSURANCE COMPANY has caused these presents to be signed by its Vice President and its Corporate Seal to be hereto 22nd day of November ,A.D.,19**93**_. affixed, on this



ALLSTATE INSURANCE COMPANY

By Morold E Thergold
Vice President

STATE OF ILLINOIS COUNTY OF COOK

SS.

Harold E. Shergold _,a Notary Public, do hereby certify that___ Martin J. Mulvihill personally known to be same person who is Vice President of the ALLSTATE INSURANCE COMPANY, a corporation of the State of Illinois, subscribed to the foregoing instrument, appeared before me on this 22nd day of November A.D., 1993, in person and acknowledged that he being thereunto duly authorized signed, sealed and delivered the said instrument as the free and voluntary act of said corporation and as his own free and voluntary act for uses and purposes therein set forth.

"OFFICIAL SEAL" MARTIN J. MULVIHILL Notary Public, State of Illinois My Commission Expires 8/3/96

My commission expires August 3, 1996

CERTIFICATION

I, the undersigned Vice President of ALLSTATE INSURANCE COMPANY, DO HEREBY CERTIFY that the foregoing Power of Attorney is now in full force and effect.



Signed and sealed at Northbrook, Illinois this_

Inst # 1994-35459

,A.D.,<u>1994</u> **November**

12/02/1994-35455 Vice President 10:47 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 17.00 DOS NCD

074-019 542