

9-1013

(3-89)

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA

PUBLIC OFFICIAL BOND

				Bond N	umber: _	EX838209
						96
KNOW ALL I	MEN BY THESE	PRESENTS	S, That we	Don Armstrong		
·			of	<u> Wilsonville</u>		in the State of
organized and exining the State of	sting under and Alabama	by virtue of	the Laws of the	State of Indiana, and aut	horized to	PANY, a corporation duly# become surety on bonds unto
				· · · · · · · · · · · · · · · · · · ·		<u></u>
in the State of	and and no/1	00			(\$3	in the full and just sum of 000.00 Dollars
lawful money of th	e United States,	for paymen	t of which well a	and truly to be made, we firmly by these presen	bi <mark>nd ou</mark> rs	elves, our heirs, executors,
SIGNED ANเ	O SEALED this	12th_	day of	November		A.D. 19 <u>96</u> .
WHEREAS, t	he said	Don Ar	mstrong -			for a term
-			•	unty Commissioner	.	, 19_96, and
beginning on the	10th	day of	November	· · · · · · · · · · · · · · · · · · ·	·	, 19_96, and
ending on the	10611	day or	MOA6mber	· · · · · · · · · · · · · · · · · · ·		
void, otherwise to	be and remain WHEREOF, the	in full forces	e and virtue.* al has hereunto	set his hand and the said Attorney-in-Fact, the day	d AMERIC y and year	PRINCIPAL
	-				\$ & & 5 * *	1996-37728Y-IN-FACT
STATE OF	ALABAMA		SS.:	11 10:	/14/1 56 AM	996-37728 CERTIFIED
COUNTY OF	SHELBY		}	SHE	TBA COMMLA	JUDGE OF PROBATE
Before me, this	12th	day of		November		A.D., 19 <u>96</u>
personally appea	ared the said	<u> </u>	on Armstron			, to me known
and known to me	e to be the indiv	dual descri	bed in and who	executed the foregoing	bend, ar	nd he acknowledged to me
	cuted the same.			Butt	set A	ausort
		-				



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_ -----GEORGE T. BENTLEY, REBECCA BRASHER OR PEGGY WOOD-------Alabama Columbiana ____ and State of 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 THREE HUNDRED THOUSAND AND NO/100 (\$300,000.00) DOLLARS---Q 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 is 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: OD "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 Second Vice-President, attested by its Assistant Vice-President and its corporate seal to be hereto affixed this ____30th day of ____ AMERICAN STATES INSURANCE COMPANY A.D. 19 .94 . ATTEST: Assistant Vice-President STATE OF INDIANA SS COUNTY OF MARION A.D., 19 94, before me personally came June 30th On this _ Joseph F. Heim being by me duly sworn, acknowledged the execution of the above instrument and did depose and say; that he is a Second 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 further said that he is acquainted with John J. Rosich and knows him to be the Joseph F. Heim Assistant Vice-President of said Corporation; and that he executed the above instrument. Notary Public 11/14/1996-37728 STATE OF INDIANA 10:56 AM CERTIFIED COUNTY OF MARION __, the Assistant Vice-President of AMERICATURINATED INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICANSSTATES 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, 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 facsimilies. 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 _ A.D., 19<u>96</u>.

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.

Assistant Vice-President