American States Insurance

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA 46204-1275

Inst # 2001-02985

PUBLIC OFFICIAL BOND

MARONAL ALLE NACES DON THEODE DESCRIPTION TO THE SECOND	Bond Number: E	01/29/2001-02985
KNOW ALL MEN BY THESE PFLESENTS, That we,	Billy C. Thompson	SHELBY COUNTY JUDGE OF THUM
of		in the State of
Alabama as Principal, and AMERICAN	Columbiana STATES INSURANCE COI	
organized and existing under and by virtue of the Laws of the		
	rety, are held and firmly bou	1;
Shelby County		
in the State of Alabama, in the full and j	ust sum of <u>Three Thousa</u> (\$3,000.00	nd and no/100) Dollars
lawful money of the United States, for payment of which well executors, administrators, successors and assigns, jointly and se	and truly to be made, we	bind ourselves, our heirs,
SIGNED AND SEALED this 5th day of	<u>January</u>	A.D. <u>2001</u> .
WHEREAS, the said Billy C. Tho	mpson	
has been duly elected or appointed to the office of	ommissioner	for a term
beginning on the 14th day of November		, 2000 and
ending on the 14th day of November	r	, 2004
obligation to be void, otherwise to be and remain in full force and IN WITNESS WHEREOF, the said Principal has here.		
INSURANCE COMPANY has caused these presents to be signed written. **The Company has caused these presents to be signed written. **Witness		PRINCIPAL

WARNING

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

					ER OR PEGGY WOO	
fColu	ımbiana		and State of		Alabama	· · · · · · · · · · · · · · · · · · ·
s true and lawful Attor	ney(s)-in-Fact, with full	power and autho	rity hereby confe	rred in its name	e. place and stead to evi	acute acknowledge or
cure any and an DOROS	s, recognizances, contrac	ts of indemnity ar	nd other condition	al or obligators u	ndodokina neosesi	464 1
hat the penal	sum of any o	ne such i	nstrument	evecuted	hereunder shal	ded, nowever
THE HOUDING	TUUDAND AND	NO/THE EST	300 000 NC)	1	
nd duly attested by its Second may be revoked pursuant the Chairman, the or Assistant Vice-Pas the business of recognizances, stip	cretary, hereby ratifying and to the cretary, hereby ratifying an uant to and by authority graphe President or any Vice-leadent) shall have power the Corporation may respond to the corporation of the Corporation may respond to the corporation of the corporatio	nd confirming all the anted by Section 7 anted by Section 7 President (including and the authorized and to authors, whether by wards, whether by wards.	nat the said Attorned 7.07 of the By-Law ng any Executive 1 concurrence with a horize any such p ay of surety or oth	signed by the Presey(s)-in-Fact may only of the American Vice-President, Scany other officer of the execute herwise"	sident, sealed with the commodo in the premises. This Power States Insurance Company enior Vice-President, Second the Corporation, to appoint a condense of the Corporation.	on seal of the Corporation on seal of the Corporation of Attorney is executed, which reads as followed the Vice-President Attorneys-in-fact attorneys bonds,
IN WITNESS WHERE	EOF, American States Ins	urance Company	has caused these	e presents to be s	signed by its Second Vice-I	President attacted by it
sistant Vice-President a	and its corporate seal to	be hereto affixed	this 27th	day of	May	resident, attested by it
D. 19 <u>98</u> .				_	SURANCE COMPANY	
				CAN STATES IN	SUMANCE COMPANY	
	\mathcal{M}			0		
TEST:	tellen				1120	*
· · · · · · · · · · · · · · · · · · ·	Assistant Vice-President		Ву	- Jose	Second Vice-President	
·	TOTAL TICE TO TOTAL TICE				Second Wice-President	ES INS
ATE OF INDIANA			A	nn4_nag	Q==	
ATE OF INDIANA	U ss	0.5	01/29/20 B:34 AM	いしまってほうし	ED	(\$ (\$ €6)
UNTY OF MARION		U¢		TARROT OF OPOLIS	r c	13 Cuorn
On this 27th		May S	SHELBY COUNTY J	מת ארי אנו באנונון מח	:L	1997 X
On this	day of	riay	005 HWA	.00	_ , A.D., 19 <u>98</u> , befor	e me personally cam
Joseph F.	•					,,
il; that it was so affixed Joseph F. He i	by authority of the Board	d of Directors of s	said Corporation;	and that he signed th	and say; that he is a Sec effixed to the said instrumed and his name thereto under Lawrenceand	_ , to me known, who cond Vice-President on the corporate like authority. And said knows him to be the
	or said Corporation, an	o mar ne execu	ted the above in	strument.	1 . 1	
	. Poneler, notai			Smil	2221	//.
	COUNTY, STATE OF			CULLY	1100 101	DUN
60.4. 自动规划	118510N EXPIRES:	10/2/2000		•	Notary Public	OY O
ATE OF INDIANA UNTY OF MARION	ss	·				(2) Seal
. Marela A. Z.	•					NOIAH
till in force and effect.	•	_	,	y baid rillierii	ISURANCE COMPANY, ICAN STATES INSURANC	JE COMPANY, WNICH
URANCE COMPANY	r instruments of insuran	ce issued by the	Corporation sha	all be signed on I	n 8.03 of the By-Laws of behalf of the Corporation	by the Chairman,
he president or any vid	ident) and the secretary	assistant secreta	ary, or other office	er, whose signati	ent, Vice-President, Secondres, if the instrument is o	nd Vice-President, luly countersigned
or Assistant Vice-Presidely an authorized repre- binding upon the Corp	esentative of the Corpo poration notwithstanding insurance shall have b				to be such officer at the	time such policy
or Assistant Vice-Presidely an authorized repre- binding upon the Corporation of the corp	poration notwithstanding	een actually issu	ued by the Corp	oration,"	The be such officer at the	January
or Assistant Vice-President by an authorized repre- binding upon the Corp or other instrument of In witness whereof, I	poration notwithstanding insurance shall have b	een actually issu	ued by the Corp	oration,"	The be such officer at the	time such policy

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.