

NOTARY PUBLIC, STATE - AT - LARGE

32S399679

THE STATE OF ALABAMA

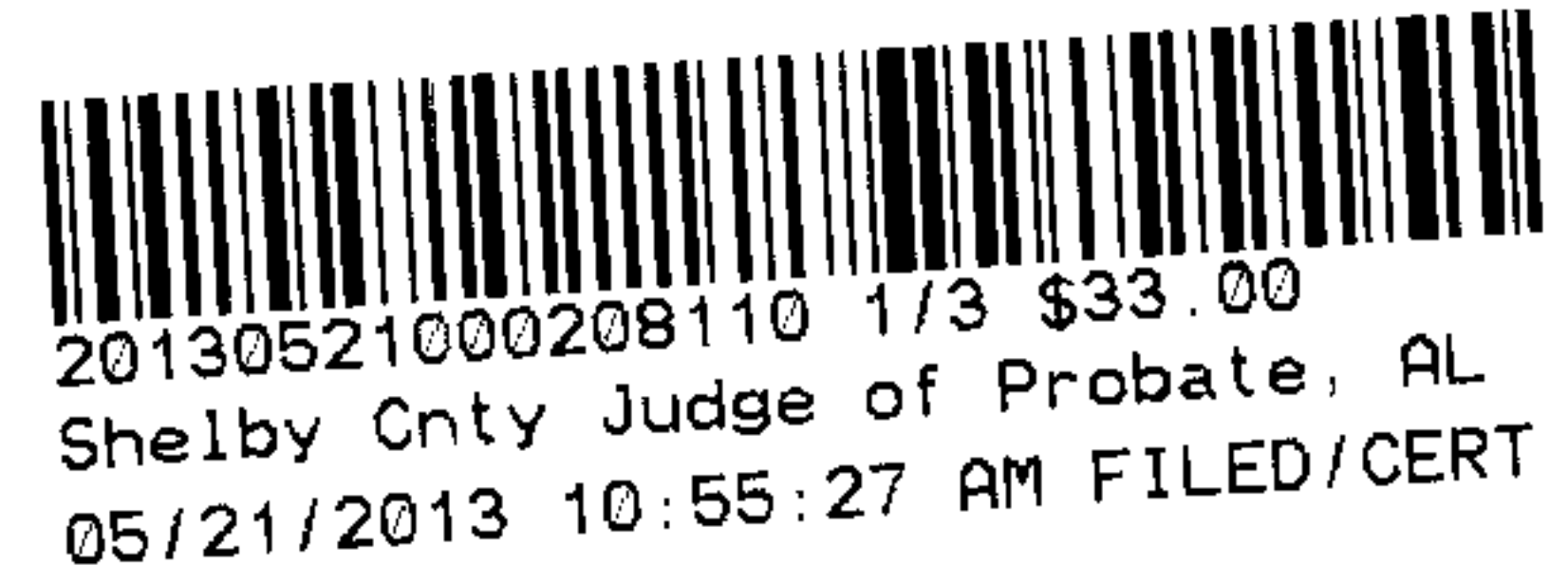
Shelby

County

Know All Men By These Presents

THAT WE MARCUS L. HUNT

Birmingham, ALABAMA



AS PRINCIPAL and The Ohio Casualty Insurance Company, AS SURETY are held and firmly bound unto the State of Alabama in the sum of TWENTY-FIVE THOUSAND AND NO/100 (\$25,000) 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 13th day of May, A.D., 2013 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 for term four (4) years from notary commission.

Sealed with our seals and dated this 13th day of May, A.D., 2013

MARCUS L. HUNT



MARCUS L. HUNT Principal

The Ohio Casualty Insurance Company

BY

MICHELLE TUCKER Attorney-in-Fact

Approved and ordered of Record this 21st day of May, 2013

Judge of Probate Court [Signature] County SHELBY

OATH OF OFFICE

THE STATE OF ALABAMA

shelby County

Probate Court

I, MARCUS L. HUNT, do solemnly swear that I will support

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 7th day of May, 2013

Emily Coleman Betts Notary Public

[Signature] Principal

Filed in the office of the judge of Probate Court, this _____ day of _____

Judge of Probate Court _____ County

Recorded in Official Bond Record _____, Page _____

SB819
(1-95)

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

THE OHIO CASUALTY INSURANCE COMPANY
KEENE, NEW HAMPSHIRE
POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS that The Ohio Casualty Insurance Company, a New Hampshire corporation, does hereby appoint
***** MICHELLE TUCKER *****

Its true and lawful attorney(s)-in-fact, with full authority to execute on behalf of the company the following surety bond:

Surety Bond Number: **32S399679**

Principal: **MARCUS L. HUNT**

Bond Amount: Twenty-five Thousand Dollars And Zero Cents

DOLLARS (\$25,000.00)

and to bind The Ohio Casualty Insurance Company thereby as fully as if such instruments had been duly executed by its regularly elected officers at its home office.

That this power is made and executed pursuant to and by authority of the following By-law and Authorization:

ARTICLE IV - Execution of Contracts: Section 12. Surety Bonds and Undertakings.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitations as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the president and attested by the secretary.

By the following instrument the chairman or the president has authorized the officer or other official named therein to appoint attorneys-in-fact:

Pursuant to Article IV, Section 12 of the By-laws, Gregory W. Davenport, Assistant Secretary of The Ohio Casualty Insurance Company, is authorized to appoint such attorneys-in-fact as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

That the By-law and the Authorization set forth above are true copies thereof and are now in full force and effect.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Corporation and the corporate seal of The Ohio Casualty Insurance Company has been affixed thereto in Seattle, Washington 1st day of December, 2012.

20130521000208110 2/3 \$33.00
Shelby Cnty Judge of Probate, AL
05/21/2013 10:55:27 AM FILED/CERT



The Ohio Casualty Insurance Company

By 
Gregory W. Davenport, Assistant Secretary

STATE OF WASHINGTON
COUNTY OF KING ss

On this 1st day of December, 2012, before me, a Notary Public, personally came Gregory W. Davenport, to me known and acknowledged that he is a Assistant Secretary; that he knows the seal of said corporation; and that he executed the above Power of Attorney and affixed the corporate seal of The Ohio Casualty Insurance Company thereto with the authority and at the direction of said corporation.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Seattle, Washington, on the day and year first above written.



By 
KD Riley, Notary Public

CERTIFICATE


I, the undersigned, Assistant Secretary of The Ohio Casualty Insurance Company, do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the officer or official who executed the said power of attorney is an Assistant Secretary specially authorized by the chairman or the president to appoint attorneys-in-fact as provided in Article IV, Section 12 of the By-laws of The Ohio Casualty Insurance Company.

This certificate and the above power of attorney may be signed by facsimile or mechanically reproduced signatures under and by authority of the following vote of the board of directors of The Ohio Casualty Insurance Company effective the 15th day of February, 2011.

VOTED that the facsimile or mechanically reproduced signature of any assistant secretary of the company, wherever appearing upon a certified copy of any power of attorney issued by the company in connection with surety bonds, shall be valid and binding upon the company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said company, this 13th day of May, 2013.



By 
David M. Carey, Assistant Secretary

The Ohio Casualty Insurance Company

NOTARY PUBLIC ERRORS AND OMISSIONS POLICY

POLICY NO. E & O 32S399679

The Ohio Casualty Insurance Company will pay on behalf of MARCUS L. HUNT
of 1415 Marion Court Birmingham, AL 35242

(Address)

(hereinafter called the insured), all sums which the insured shall become obligated to pay by reason of liability for breach of duty while acting as a duly commissioned and sworn Notary Public, claim for which is made against the insured by reason of any negligent act, error or omission, committed or alleged to have been committed by the insured, arising out of the performance of notarial service for others in the insured's capacity as a duly commissioned and sworn Notary Public.

POLICY PERIOD: This policy applies only to negligent acts, errors or omissions which occur during the policy period and then only if claim, suit or other action arising therefrom is commenced during the policy period, and is not barred by the applicable Statute of Limitations pertaining to the insured. The Policy Period commences on the effective date of the insured's commission as a Notary Public and terminates upon the expiration of the Insured's commission as a Notary Public unless cancelled earlier as provided in this policy. This policy is not valid for more than one commission term.

LIMITS OF LIABILITY: The liability of this company shall not exceed in the aggregate for all claims under this insurance the amount of Twenty-five Thousand Dollars And Zero Cents (\$25,000.00).

In addition to the limit of liability and in accordance with the other provisions of this policy, this company will pay costs and expenses paid and incurred in investigating, contesting or settling liability in an amount not to exceed, in the aggregate, one-half of the limit of this policy.

INSURED'S DUTIES IN THE EVENT OF OCCURRENCE, CLAIM, OR SUIT:

- (a) Upon knowledge of any occurrence which may reasonably be expected to result in a claim or suit, written notice containing particulars sufficient to identify the Insured and also reasonably obtainable information with respect to the time, place and circumstances thereof, and the names and addresses of the potential claimant and of available witnesses, shall be given by or for the Insured to the Company or any of its authorized agents as soon as practicable, but in no event longer than forty-five(45) days after discovery.
- (b) If claim is made or suit is brought against the Insured, the Insured shall immediately forward to the Company every demand, notice, summons or other process received by him or his representative.
- (c) The Insured shall cooperate with the Company and, upon the Company's request, assist in making settlements, in the conduct of suits and the Insured shall attend hearings and trials and assist in securing and giving evidence and obtaining the attendance of witnesses. The Insured shall not, except at his own cost, voluntarily make any payment, assume any obligation or incur any expense except with the prior written consent of the Company.

EXCLUSIONS: Coverage under this policy does not apply to any dishonest, fraudulent, criminal or malicious act or omission of the insured.

CO-INSURANCE: If the insured has other insurance against a loss covered by this policy, the company shall not be liable under this policy for a greater proportion of such loss, cost and expenses than the limit of liability stated in this policy bears to the total limit of liability of all valid and collectible insurance against such loss.

CANCELLATION: This policy may be cancelled by the Company by mailing thirty (30) days written notice to the Insured and may be cancelled by the Insured by surrender thereof to the Company or any of its agents or by mailing to the Company thirty (30) days written notice and this policy shall be deemed cancelled and the Policy Period terminated upon such return or at the expiration of said thirty (30) days. A pro rata return premium shall be allowed on cancellation.

Dated, signed and sealed this 13th day of May, 2013.

Address Claims to:
Liberty Mutual Surety
1001 4th Avenue, Suite 1700
Seattle, WA 98154



The Ohio Casualty Insurance Company

By Timothy A. Mikolajewski
Timothy A. Mikolajewski, Assistant Secretary

