## **NOTARY PUBLIC, STATE - AT - LARGE**

32S550305

THE STATE OF ALABAMA County Shelby Know All Men By These Presents THAT WE ERIN HUTCHINSON Shelby Chty Judge of Probate, AL Birmingham, ALABAMA 11/15/2017 11:07:04 AM FILED/CERT , AS SURETY are held and firmly bound unto the State AS PRINCIPAL and The Ohio Casualty Insurance Company 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 15th day of Milliam line. A.D., 2017 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. day of November A.D., 2017 Sealed with our seals and dated this 6th ERIN HUTCHINSON Principal The Ohio Casualty Insurance Company BY CASS VICKERY - Attorney-in-Fact Menter Approved and ordered of Record this Judge of Probate Court County **OATH OF OFFICE** THE STATE OF ALABAMA **Probate Court** County , do solemnly swear that I will support ERIN HUTCHINSON 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 day of 7 Vilunitur **Notary Public** 328-201 Principal 15th day of Demember, 2017 Filed in the office of the judge of Probate Court, this

County

Page

LMS-14672 04/02

SB819

(1-95)

Judge of Probate Court

Recorded in Official Bond Record

## The Ohio Casualty Insurance Company NOTARY PUBLIC ERRORS AND OMISSIONS POLICY

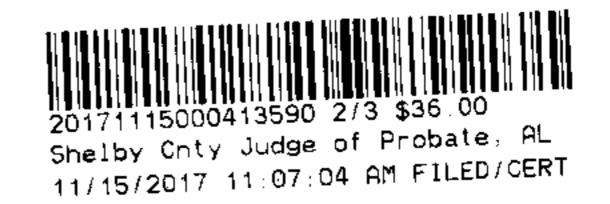
POLICY NO. E & O 32S550305

	ll pay on behalf of ERIN HUTCHINSON	
of 1109 Altadena Rise Birmingham, AL 35242	· · · · · · · · · · · · · · · · · · ·	
(hereinafter called the insured), all sums which the insurable acting as a duly commissioned and sworn Notary negligent act, error or omission, committed or alleged to notarial service for others in the insured's capacity as a	Public, claim for which is made against the have been committed by the insured, aris	e insured by reason of any sing out of the performance of
POLICY PERIOD: This policy applies only to neglige only if claim, suit or other action arising therefrom is constitute of Limitations pertaining to the insured. The Police and Notary Public and terminates upon the expiration of provided in this policy. This policy is not valid for more for	mmenced during the policy period, and is re licy Period commences on the effective dat of the Insured's commission as a Notary Pu	not barred by the applicable te of the insured's commission
LIMITS OF LIABILITY: The liability of this company s amount of Twenty-five Thousand Dollars And Zero Cents	shall not exceed in the aggregate for all clai	ims under this insurance the
(\$25,000,00 ). In addition to the limit of liable will pay costs and expenses paid and incurred in invegage aggregate, one-half of the limit of this policy.	estigating, contesting or settling liability in	
INSURED'S DUTIES IN THE EVENT OF OCCURRE	ENCE, CLAIM, OR SUIT:	
<ul> <li>(a) Upon knowledge of any occurrence which may containing particulars sufficient to identify the Inseplace and circumstances thereof, and the names be given by or for the Insured to the Company or longer than forty-five(45) days after discovery.</li> <li>(b) If claim is made or suit is brought against the demand, notice, summons or other process received.</li> <li>(c) The Insured shall cooperate with the Company conduct of suits and the Insured shall attend hear the attendance of witnesses. The Insured shall nobligation or incur any expense except with the process.</li> </ul>	sured and also reasonably obtainable informs and addresses of the potential claimant at any of its authorized agents as soon as previously the Insured shall immediately forwaived by him or his representative.  By and, upon the Company's request, assistatings and trials and assist in securing and not, except at his own cost, voluntarily makens.	mation with respect to the time, nd of available witnesses, shall racticable, but in no event ward to the Company every it in making settlements, in the giving evidence and obtaining
EXCLUSIONS: Coverage under this policy does not the insured.	apply to any dishonest, fraudulent, crimina	l or malicious act or omission of
CO-INSURANCE: If the insured has other insurance under this policy for a greater proportion of such loss, of total limit of liability of all valid and collectible insurance	cost and expenses than the limit of liability s	
CANCELLATION: This policy may be canceled by the may be canceled by the Insured by surrender thereof to (30) days written notice and this policy shall be deemed expiration of said thirty (30) days. A pro rata return present	o the Company or any of its agents or by m d canceled and the Policy Period terminate	nailing to the Company thirty
Dated, signed and sealed this 6th	day of November	, 2017
	The Ohio Casualty Insuran	ce Company
Address Claims to: Liberty Mutual Surety	SURAL	· O .

Address Claims to:
Liberty Mutual Surety
1001 4th Avenue, Suite 3800
Seattle, WA 98154



By Timothy A. Mikolajewski, Assistant Secretary



The Ohio Casualty Insurance Company

## **POWER OF ATTORNEY**

	Bond Amount: (\$25,000.00 ) Twenty-five Thousand Dollars And Zero Cents  KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint. CASS VICKERY
	all in the city of <u>Hamilton</u> , state of <u>A1</u> . each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.
	IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this <u>26th</u> day of <u>September</u> , <u>2016</u> .
ئد	The Ohio Casualty Insurance Company  The Ohio Casualty Insurance Company  The Ohio Casualty Insurance Company  By:  By:
itees	David M. Carey, Assistant Secretary
Jarar	STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY
letter of credi ual value gua	On this 26th day of September , 2016, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.
rate or resid	Upper Merion Twp., Montgomery County  By:  My Commission Expires March 28, 2021
terest	Mambar Connections Association of Notarios
e.	This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:
rency rai	ARTICLE IV – OFFICERS – Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation 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 to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.
	Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.
	<b>Authorization</b> – By unanimous consent of the Company's Board of Directors, the Company consents that 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.
	I. Renee C. Llewellyn, 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 of the Power of Attorney executed by said Company, is in full force and effect and has not been revoked.
	IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seals of said Company this day of November
	20171115000413590 3/3 \$36.00  By: Remichalism Assistant Socretary