BOND No. 106966620	6620
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BOND OF NOTARY PUBLIC ALABAMA

STATE OF ALABAMA	20180918000334780 1/6 \$30.00 20180918000334780 1/6 \$30.00 Shelby Cnty Judge of Probate, AL
SHELBY COUNTY	Shelby Cnty Judge 6. The Shelby Cnty Judge 6.
	/ -
KNOW ALL MEN BY THESE PRESENTS:	
THAT WE, Donna D. Coleman	of 4064 Forest Lakes Road STERRETT, AL 35147
as Principal and, Travelers Casualty and Surety Company of Amer	
as Surety, are held and firmly bound unto the State of Alabama (\$25,000.00), for the payment of which well and truly to ladministrators, and assigns, firmly by these presents, and we have of Alabama.	
THE CONDITION OF THE ABOVE OBLIGATION IS SUCH the office of Notary Public for the State at Large on the	H, That whereas the above bound Principal was duly appointed to day of Systember, 2018; for the term of four Exp. 9 18 22
NOW IF THE SAID Principal shall faithfully discharge all dutabove obligation to be void, otherwise to remain in full force a	ties of said office during his/her continuance therein, then the and effect.
Sealed with our seals, and dated this	18 day of September 2018-
Travelers Casualty and Surety Company of America	Donna D. Coleman
BY: Dr. J. Byan	BY: XOona D. Coleman
John S. Byers Attorney in Fact	Principal
Approved and ordered of Record this	ptember, 2018
	5. Seyl
	Judge of Probate Court
OATH OF OFFICE	
STATE OF ALABAMA SHELBY COUNTY	
I, Donna D. Coleman and the Constitution of the State of Alabama, so long as I remarks discharge the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon which I am about to enterprise the duties of the office upon the	·
(Signature of Appointee)	
Subscribed and sworn before me this 4 day of Sept	ember, 2018.
Alma Denise Josdan	

Travelers Casualty and Surety Company Travelers Casualty and Surety Company of America

One Tower Square, Hartford, Connecticut 06183

NOTARY PUBLIC ERRORS AND OMISSIONS POLICY

Policy No.: 106966620

Term Premium: **\$120.00**

Policy Effective Date: October 13, 2018

The Company will pay on behalf of **Donna D. Coleman**of **4064 Forest Lakes Road STERRETT, AL 35147** (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

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 within the applicable Statute of Limitations pertaining to the Insured. The Policy Period commences on the Effective Date hereof 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.

LIMIT OF LIABILITY: The liability of the Company shall not exceed in the aggregate for all claims under this insurance the amount of **Twenty Five Thousand**(\$25,000.00) DOLLARS. In addition to the limit of liability and in accordance with the other provisions of this policy, the 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.

OTHER 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: The insured may cancel this policy at any time by mailing or delivering to us advance written notice of cancellation. The company may cancel this policy by mailing or delivering to the insured written notice of cancellation at least 10 days before the effective date of cancellation if we cancel for nonpayment of premium or 30 days before the effective date of cancellation if we cancel for any other reason. If we cancel, the premium refund will be pro rata and if the insured cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.

IN WITNESS WHEREOF, the Company has caused this Policy to be signed by its authorized Company officers at Hartford, CT.

Executive Vice President

Thomas M. Hundl

Notary Public.

Corporate Secretary

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20180918000334780 2/6 \$36.00
2018091R000334780 2/6 \$36.00
Shelby Cnty Judge of Probate; AL

ISSUED BY: Travelers Casualty and Surety Company of America

POLICY NO: 106966620

ISSUED TO: Donna D. Coleman

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CANCELLATION/NONRENEWAL - ALABAMA FULL CANCELLATION - INSURER

It is agreed that:

1. The policy provisions regarding cancellation by the Company are deleted and replaced with the following:

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- A. We may cancel this Policy for any reason not otherwise prohibited by state law by mailing or delivering to the entity named in Item 1 of the Declarations written notice of cancellation at least 10 days before the effective date of cancellation.
- 2. The following is added and supersedes any other provision to the contrary:

NONRENEWAL

- A. If we decide not to renew this Policy, we will mail or deliver written notice of nonrenewal to the entity named in Item 1 of the Declarations, at least 10 days before its expiration date, or its anniversary date if it is a Policy written for a term of more than one year or with no fixed expiration date.
- 3. Proof of mailing is sufficient proof of notice.

Nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, exclusions or limitations of the above mentioned policy, except as expressly stated herein. This endorsement is effective at the inception date stated in the Declarations and this endorsement is part of such policy and incorporated therein.

Shelby Cnty Judge of Probate, AL 09/18/2018 12:57:26 PM FILED/CERT

ISSUED BY: Travelers Casualty and Surety Company of America

ISSUED TO: Donna D. Coleman

POLICY NO: 106966620

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CANCELLATION/NONRENEWAL - ALABAMA CANCELLATION FOR NONPAYMENT OF PREMIUM

It is agreed that:

- 1. The policy provisions regarding cancellation by the Company are deleted and replaced with the following:
 - A. We may cancel this Policy for nonpayment of premium by mailing or delivering to the entity named in Item 1 of the Declarations written notice of cancellation at least 10 days before the effective date of cancellation.
- 2. The following is added and supersedes any other provision to the contrary:

NONRENEWAL

- A. If we decide not to renew this Policy, we will mail or deliver written notice of nonrenewal to the entity named in Item 1 of the Declarations, at least 10 days before its expiration date, or its anniversary date if it is a Policy written for a term of more than one year or with no fixed expiration date.
- 3. Proof of mailing is sufficient proof of notice.

Nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, exclusions or limitations of the above mentioned policy, except as expressly stated herein. This endorsement is effective at the inception date stated in the Declarations and this endorsement is part of such policy and incorporated therein.

20180918000334780 4/6 \$36.00 Shelby Cnty Judge of Probate, AL 09/18/2018 12:57:26 PM FILED/CERT



POWER OF ATTORNEY

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company

Surety Bond No.

106966620

Principal: Donna D. Coleman

4064 Forest Lakes Road STERRETT, AL 35147

Obligee:

State of Alabama Notary Services Div. P.O. Box 1656 MONTGOMERY, AL 36103

KNOW ALL MEN BY THESE PRESENTS: That Farmington Casualty Company, St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, are corporations duly organized under the laws of the State of Connecticut, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc. is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint John S. Byars, of the City of Jasper, State of AL, their true and lawful Attorney(s)-in-Fact, to sign, execute, seal and acknowledge the surety bond referenced above.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereto affixed, this 7th day of July, 2016.

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company



















State of Connecticut

City of Hartford ss.

By: Robert L. Raney, Senior Vice President

On this the **7th** day of **July**, **2016**, before me personally appeared **Robert L. Raney**, who acknowledged himself to be the Senior Vice President of Farmington Casualty Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021.

SECTION *

Marie C. Tetreault, Notary Public

20180918000334780 5/6 \$36.00

Shelby Cnty Judge of Probate, AL 09/18/2018 12:57:26 PM FILED/CERT

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Farmington Casualty Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary, of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which 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 Companies this 14 day of August, 2018.

Kevin E. Hughes, Assistant Secretary

far E. Hugen



















To verify the authenticity of this Power of Attorney, call 1-800-421-3880 or contact us at www.travelersbond.com. Please refer to the above-named individuals and the details of the bond to which the power is attached.

