

618785

PUBLIC EMPLOYEES BLANKET BOND
Revised to May, 1958

618785

AMERICAN STATES INSURANCE COMPANY
INDIANAPOLIS, INDIANA

STATE OF INDIANA
EAST CHICAGO
FEB 21 9 40 AM '81
WILLIAM KILBICKI JR.
RECORDER

(A Stock Company, herein called Surety)

DECLARATIONS

- Item 1. Name of Oblige: State of Indiana
- Item 2. Name of Insured: Board of Lake County Commissioners
Crown Point, Indiana
- Item 3. Bond Period: from the beginning of January 1, 1981
to 12 o'clock night on the effective date of the cancelation or termination of this Bond as an entirety. (MONTH, DAY, YEAR)
- Item 4. **Table of Limits of Liability:**

Insuring Agreement 1	Honesty Blanket Bond Coverage	\$ NIL
Insuring Agreement 2	Honesty Blanket Position Bond Coverage	\$ NIL
Insuring Agreement 3	Faithful Performance Blanket Bond Coverage	\$ NIL
Insuring Agreement 4	Faithful Performance Blanket Position Bond Coverage	\$ 5,000.00
- Item 5. The liability of the Surety is subject to the terms of the following riders attached hereto:
SE 5661 Additional Indemnity Rider
- Item 6. The Oblige and the Insured by the acceptance of this Bond give notice to Surety terminating or canceling prior bond(s) No.(s) NIL
such termination or cancelation to be effective as of the time this Bond becomes effective.

James P. Coover
President

Paul M. Sanders
Secretary

Countersigned by [Signature]
AUTHORIZED AGENT

PUBLIC EMPLOYEES BLANKET BOND

Bond No. EX 371-488
Oblige State of Indiana
Insured Board of Lake County Commissioners

AMERICAN STATES INSURANCE COMPANY
HOME OFFICE :: INDIANAPOLIS, IND.



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