

639527

AMERICAN STATES INSURANCE COMPANY

INDIANAPOLIS, INDIANA

PUBLIC OFFICIAL NAME SCHEDULE BOND

KNOW ALL MEN BY THESE PRESENTS, That the AMERICAN STATES INSURANCE COMPANY, of Indianapolis, Indiana, a corporation organized and existing under the laws of the State of Indiana (hereinafter called Surety), is held and firmly bound unto the State of Indiana

(hereinafter called Obligee), in the sums set opposite the names of the Officials listed in the attached Schedule or as added to said schedule as hereinafter provided, for the payment of which sums the Surety binds itself, its successors, and assigns, firmly by these presents.

WHEREAS, The Obligee desires to have the various named Officials, as listed in that attached schedule or added thereto as hereinafter provided, bonded for the faithful performance of their duties in the amounts set opposite their respective names (each named Official being hereinafter called Principal).

The term of this Bond is one (1) Year, beginning with the 1st day of July 1981 and ending with the 1st day of July 1982.

NOW, THEREFORE, The conditions of this obligation is such that if each Principal, while occupying and performing the duties as listed in the attached Schedule, or added thereto as hereinafter provided, shall well, truly and faithfully perform the duties of his office as required by law or ordinance, then this obligation shall be void; otherwise, it shall remain in full force and effect.

PROVIDED, HOWEVER, That this Bond is executed and accepted subject to the following agreements and limitations:

- FIRST: That any Principal performing the duties covered hereunder shall not be covered for a larger amount in the aggregate than the amount set opposite his name in said Schedule.
- SECOND: If the Obligee shall request the Surety to add to said Schedule any Official not named therein, and the Surety shall elect so to do, the Surety shall add the name of such official to said Schedule by written acceptance.
- THIRD: Upon the payment of any loss as a result of the acts of any official covered hereunder, the Obligee shall, to the extent of the payment so made, assign to the Surety the claim of the Obligee against such Principal.
- FOURTH: This bond shall be deemed cancelled as to any Principal upon the death, resignation, or removal of such principal.

SIGNED, SEALED, AND DATED this 28th day of July, 1981

AMERICAN STATES INSURANCE COMPANY

By Theresa Bryant
Theresa Bryant Attorney-in-Fact

Countersigned:

By William B. Bielinski Jr.
Agent

Form 9-1083
(11-59)

MITCHELL INSURANCE, INC.
Phone 387-1828
P. O. Box 3156--East Chicago, Ind. 46312

STATE OF INDIANA, S. NO
LAKE COUNTY
FILED FOR RECORD
AUG 10 10 40 AM '81
WILLIAM BIELINSKI JR
RECORDED