

INSURANCE COMPANY OF NORTH AMERICA, PHILADELPHIA, PENNSYLVANIA MJ00063988 BOND NO. PUBLIC OFFICIAL BOND Amount \$ 100,000.00 APRIL E. WOODEN KNOW ALL MEN BY THESE PRESENTS, That we\_ in the State of INDIANA as Principal, and the INSURANCE COMPANY OF NORTH AMERICA, a corporation duly organized and existing under and by virtue of the laws of the State of Pennsylvania, as Surety, are held and firmly bound unto THE CITY OF HAMMOND, DEPARTMENT OF REDEVELOPMENT ONE HUNDRED THOUSAND AND 00/100 ----in the full and just sum of\_\_\_ (\$ 100,000.00 \_) Dollars, lawful money of the United States, for the payment of whicewell and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and several processors. ly, firmly by these presents; day of January 1st SIGNED AND SEALED this\_ APRIL E. WOODEN WHEREAS, the said\_\_\_ EXECUTIVE DIRECTOR, DEPARTMENT been duly elected or appointed. January 1, 1983 December 31, 1983 \_\_and ending\_ for the term beginning \_\_\_\_\_ NOW, THEREFORE, the condition of the above obligation is such, that if the above bounden\_ APRIL E. WOODEN shall well and faithfully perform all the 🖺 EXECUTIVE DIRECTOR DEPARTMENT OF REDEVELOPMENT duties of his said office of\_ as required by law, then this obligation to be null and void; otherwise to be and remain in full force and virtue. This bond is given and received under the following express conditions: That if the Surety shall so elect, this bond may be cancelled by giving thrity (30) days notice in writing to CITY OF HAMMOND, DEPARTMENT OF REDEVELOPMENT and this bond shall be deemed cancelled at the expiration of thirty (30) days after such notice has been given, and said Surety remaining liable for all or any act or acts covered by this bond, which may have been committed by the Principal up to the date of such cancellation, under the terms, conditions and provisions of this bond, and the Surety shall, upon surrender of this bond and its release from all liability thereunder, refund the premium paid, less a pro-rata part thereof, for the time this bond shall have been in force; That the Surety hereunder shall not be liable for any loss which may be sustained through the failure of any bank or banks or other depository to pay or deliver over any moneys and securities deposited with it by the said APRIL F. WOODEN which may come into his hands by virtue of his said office. IN TESTIMONY WHEREOF, the said Principal has hereunto set his hand and seal and the said INSURANCE COM-PANY OF NORTH AMERICA, has caused these presents to be signed by its duly authorized officers, and its corporate seal to be hereunto affixed, the day and year first above written. AICP (Seal) Principal.

INSURANCE COMPANY OF NORTH AMERICA

COUNTY OF

personally appeared the said\_ to me known and known to me to be the individual described in and who executed the foregoing bond, and he acknowledged to me that he executed the same.