

825240

Gary Public Lib.

VERIFICATION CERTIFICATE

This is to certify that Public Official Bond

, No. EX 528-043

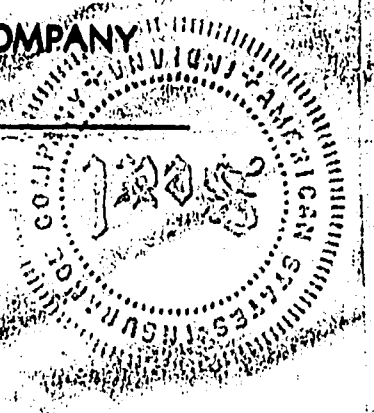
in favor of Itsia D. Rivera

and dated 6/21/84, remains in effect, subject to all its agreements, conditions and limitations.

Signed, sealed and dated October 3, 19 85.

AMERICAN STATES INSURANCE COMPANY

By: *Sally Tinkle*
Sally Tinkle Attorney-In-Fact



VERIFICATION CERTIFICATE
FOR USE WITH ALL FORMS OF STANDARD BONDS.
REVISED TO MAY, 1957.
SR 5155b Printed in U.S.A.
(Corrected)

STATE OF INDIANA
LAFAYETTE COUNTY
FILED FOR RECORD
OCT 21 1 43 PM '85
RUDOLPH CLAY
RECORDER

n/c

Alanson T. Abel further said that he is acquainted with Thomas M. Ober and knows him to be the Assistant Secretary of said Corporation; and that he executed the above instrument.

MY COMMISSION EXPIRES
JUNE 15, 1985

Theresa J. Caviness
Notary Public

STATE OF INDIANA }
COUNTY OF MARION } SS:

I, Thomas M. Ober, the Assistant Secretary of AMERICAN STATES INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, which is still in full force and effect.

This Certificate may be signed and sealed by facsimile under and by the authority of Section 8.03 of the By-Laws of AMERICAN STATES INSURANCE COMPANY which reads as follows:

"All policies and other instruments of insurance issued by the Corporation shall be signed on behalf of the Corporation by the president or a vice-president and the secretary or an assistant secretary, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimiles. Such signatures and facsimiles thereof shall be authorized and binding upon the Corporation notwithstanding the fact that any such officer shall have ceased to be such officer at the time such policy or other instrument of insurance shall have been actually issued by the Corporation."

In witness whereof, I have hereunto set my hand and affixed the seal of said Corporation, this 3rd day of October

A.D. 19 85
(SEAL)
Form 9-1469 (8-80)

Thomas M. Ober
Assistant Secretary