Personally appeared before me, Patricia J. Schoon n and for said County and State aforesaid, Beverly Shudick who being sworn, upon his oath says: "I will support the Constitution of the United States and of the State of Indiana, and I will faithfully, nonestly and impartially discharge the duties of the office of Assistant Bookkeeper-Administrat Office-School City to the best of my skill and ability." Of Hobart Shudick Subscribed and sworn to before me, this 23rd day of October 19:90 Lake County of Residence My Commission Expires: 7-14-91:	FFICIAL BOND	<u> </u>	BOND NO. EX "757	-680	
and AMERICAN STATES INSURANCE COMPANY, as Surety re held and firmly bound unto The State of Indiana, and for the benefit of persons concerned or aggrieved, in the penal'sum of FIFTY THOUSAND AND NO/100 (550,000.00) loilors, to the payment of which well and truly to be made, we bind'ourselves, our heirs, secentors and administrators, jointly and severally, firmly by these presents. Sealed-with our seals, and dated this. 24th asy of September A.D. 18 90 The condition of the above colligations as follows, viz.: NOW THE CONDITION OF THIS OBLIGATION IS:SUCH, BEVERLY SHUDTCK WHEREAS, the above named and bounden. ASSISTANT SIGNIFICATION ASSUCH, BEVERLY SHUDTCK ASSISTANT SIGNIFICATION OF THE SOURCE SCHOOL City of Hobart invand or. Lake. County, in the State of Indiana, aforesaid, for the term beginning reform and discharge the dutte size of the state of Indiana, aforesaid, for the term beginning and pay over on demand to the person in the state of Indiana, aforesaid, for the term beginning and pay over on demand to the person in the state of Indiana, aforesaid, for the term beginning and pay over on demand to the person in the state of Indiana, aforesaid, for the term beginning and pay over on demand to the person in the state of Indiana, aforesaid, for the term beginning and pay over on demand to the person in the state of Indiana, aforesaid, for the term beginning and pay over on demand to the person in the state of Indiana, aforesaid for repeal any two in force, and assistant and the state of Indiana and I will repeat the state of Indiana in the case, the state of Indiana and I will faithfully Accepted and approved this. 21st. day of Junes. State of Indiana, Lake JOURNEY, ST. School. CITY, OR. BOOK assistant Bookkeeper Administrat Offices School City to Constitution of the United States and of the State of Indiana, and I will faithfully. School County, of Residence Thicker School City to the best of my, skill and ability. Of Hobarts Of Hobarts Accepted and approved before me, this 23rd, day of Octob	KNOW ALL MEN BY THESE PRI	ESENTS, Tha	t we, BEVERLY SHU	DICK, as Pri	ncipal
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ACKNOWLEDGMENT OF PRINCIPAL

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Assistant Vice-President



American States Insurance Company INDIANAPOLIS, INDIANA

of Indiana, and having its principal office and appoint	in the City of Indiana	ares insurance Comp apolis, Indiana, hath m	ade, constitute	ation duly organized ed and appointed, an	and existing under id does by these presented in the control of th	the laws of the Statents make, constitute
SALLY TI	NKLE, DOROT	HY SUTPHIN.	LINDA S.	PING OR HEI	LËN J. FLAKE	
Indianapolis		and Sta	ate of	India	ınaı	
s true and lawful Attorney(s)-in-Fac	i, with full power ar	nd authority hereby-	conferred in*	its÷name, place an	nd stead; to execute	, acknowledge-an
feliver any and all bonds, recognizan	ces, contracts of ind	emnity and other cor	ditional or obl	igatory undertaking	s, <u>provided</u>	l, however,
that the penal sum (of any one	such instru	ment exe	ecuted here	under shall	not exceed
FIVE HUNDRED THOUSAND	AND NO/100	(\$500,000.00) DOLLAR	Š;		
and to bind the Corporation thereby a Corporation and duly attested by its Sattorney is executed and may be revolved the control of the contr	ecretary, hereby ratificed pursuant to and the angular poration may require to undertakings, when	lying and confirming by authority granted by CULTO CONTROL (Including any Executive the concurrence of and to authorize and to authorize and to authorize and the concurrence of and the concurrence of and the concurrence of and the concurrence of authorize and the concurrence of authorized authori	all that the said y Section 7,07 L S utive Vice Pres with the any o y such person or otherwise."	d Attorney(s)-in-Fac of the By-Laws of the sident, Senior-Vice ther officer of the Co to execute, on behi	et may do in the pren he American States I President, Second V proporation, to appoint all of the Corporation	nises. This Power of nsurance Company ice President Attorneys-in- n, any bonds,
Assistant Vice-President/and/its-corpo					September	
A.D. 19 <u>90</u>			AMERICA	NISTATES INSURA	NCE COMPANY	
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TTOOT.			15	1000	1 4720	110
ATTEST: Assistant Vice-F	resident		:By	Secon	nd Vice-Presidenti	
STATE OF INDIANA SOUNTY OF MARION				;		(Aller)
On this 14th day of		September		, A.D.,	19. 90; , before n	nespersonally came
	ali en en en dim	STUBLE O				
eing by me duly sworn, acknowledged	the execution of the a	bove instrument and	did depose and	isay; that he is a Vic	e-President of Americ	to me known, who can States Insurance
company; that he knows the seal of se f the Board of Directors of said Corp	sid Corporation: that	the seal affixed to the	said instrume	entiis: such corporati	e seal: that it was so	affixed by authorit
Joseph F. Heim	further said the	ati heris acquaintediv	U(1)	n J. Rosich	and k	nows him to be the
ssistant Vice-President of said Corpo	ration; and that he	executed: the above to	nstrument.		At a d	_
			<u>O/</u>	disting	Notary Public	ALPROVED TO THE PARTY OF THE PA
13	ROLYN STRADEF RION COUNTY, S		. 4	.11	totally Public	(ž (S
TATE OF INDIANA N M	Y COMMISSION	•				INC
COUNTY OF MARION: SS		•				
John J. Rosich le above and foregoing is a true and force and effect. This Certificate may be signed and OMPANY-which reads as follows: "All policies and other instruments of any vice-president (including any	correct:copy of a Portion of a	under and by the aut y the Corporation sha lent. Senior Vice Pres	cuted by said A hority of Section Il be signed on Ident, Vice Pre	AMERICAN STATES on 8:03 of the By-La behalf of the Corpo sident Second Vice	S'INSURANCE COM ws of AMERICAN ST ration by the Chairma President or Assistan	PANY, which is still TATES INSURANCE an, the President at Vice President)
and the secretary, or an assistant se of the Corporation, may be facsimile the fact that any such officer shall issued by the Corporation."	es. Such signatures	and facsimiles thereo	f shall be auth	orized and binding t	upon the Corporation	notwithstanding
In: witness whereof, I have hereur	nto set my hand and	affixed the seal of s	aid Corporatio	on, this	_ day of	lenker

·9-1459 (8-89):