and AMERICAN	EN BY THESE PRESENTS, The STATES INSURANCE COMP	ANY, as Surety "	
	······································	***************************************	
***************************************			
	ound unto The State of Indiana, a		
the penal sum of TE Dollars, to the payme	NTHOUSANDANDNO/100- ent of which well and truly to be r	nade, we bind ourselves, our he	irs, executors and admin-
istrators, jointly and	severally, firmly by these presen	ts. Sealed with our seals, and	dated this 21st
	r A. D. 19 90 T		
·	OW THE CONDITION OF		
			<b>▼</b>
than been duly elected	above named and boundendiand commissioned or appointed	Extra-Curricular Tre	asurer, Bookkeeper-
•		Hobart	-S
	County, in		` <del>-</del>
from the 1st iexduk analifed x E	day of July nding July 1, 1990	ment is 19 <sup>490</sup>	andenntibelitennessenex
Now, if the said	i	PDIANE K. AMCDANIELS	shall faithfully
perform and dischar	ge his dutius as such cacheoir	urricular Treasurer	Bookkeeper - Middle
and pay over on dem	and to the persons dutilied from	thorzad to secolve the same,	ll moneys that may come
into his hands as su	ih Extra-Curricular Tra	asurer Bookkeeper-M	ddle School-School C
now in force, and ex Legislature, without	nce in office; and further, that act any and all laws during the in any way or manner releasing	existence of the above obligation the said officer or his said secu	on at the pleasure of the
and virtue in law.	above obligation shall cease, be-	null and void, otherwise to be a	ind to remain in full force
	[Seal]	Diau K. MCDANIEL	(Seal)
	Escil	DIANE K. MCDANIELS	[Seal]
		AMERICAN STATES IN	William Land
	[Seal]	EA AMERICAN STATES IF	SURANCE COMPANY
	[Seal]	BY:	Sall [Sal]
'A ccented and te	pproved(this:21st	Linda S. Ping. day of Junes	Attorneyain-races
Acchediance	hhro.egamme	SCHOOL CITY OF HOBART	DAI CHANGE
4.		BOARD OF SCHOOL TRUSTE	ES South and the
·	,	James E 3	President
		In Jay	-LES Secretary
State of Indian	14, Lake	County, ss:	
Personally appe	aredibefore me,Patri	cia J. Schooon	
in and for said Coun who being sworn, up	ty and State aforesaid,Diane on his oath says:	K. McDaniels	***************************************
	he Constitution of the United St		
Middle School - S	ially discharge the duties of the School to the best of my skill a	· ·	Treasurer, Bookkeeper -
MARKIDINGUBLI			
ويون ه	•	Wiau K. III	Hamilton
Subscribed and	sworn to before me, this3	och day of Octob	er 19 90
1	Lake County of Residence My Commission Expires	Patriain Oche ham	· · · · · · · · · · · · · · · · · · ·
	7-14-91	Tathley J. School	1, Wotaky Public

## "ACKNOWLEDGMENT OF PRINCIPAL

Personally ap	peared: before	me,	•••••••	******************************	***************************************	*******************************	************************************
principal upon the	bond appear	ing on the r	everse side he	eof and acknow	ledges the	execution of s	aid bond
thisd		•					
			******	*******************************	***********		
							1
				••••••••••••••••••••••••••••••••••••••	Official capaci		
Expiration da	te of commissio	n, if Notary Pu	blie				
	ACK	NOWL	EDGMEN	T OF SU	RETY		يمثر
STATE: OFIn	diana:	CC	OUNTY OF	Marion'	**********	, SS:	·
				byLinda		• • • • • • • • • • • • • • • • • • • •	
its agent, surety u	pon the bond	appearing of	athe-reverse s	ide hereof and a	cknowledge	the execution	n of said
bond this 21s	day/of	Septem	er T	, 1990	1 1 1	(	March Street
•			ocurse	ntis Ly J. Tinki	Umy		
		NO'	TOFF	County of E	oone, St	ate of In	diana
Febr	uary 14	Topis Doc	ument is tl	ne property	Ondal capaci	ty	*************
Expiration:da	te of commissio	n, if Makey Py	lke County	Recorder!		en P	
)					,		
•							
			MURDER'S	.a			
•							
	·		EAL.		į		
	·		ANAIDM	min	,		
			•	/			
			٠.				
	<b>3</b> !				٠		
				•			
:II	1	<b>!</b>	, 1 all	:   <b>♂</b>	i. I	. 1 1	.1 A
		-	K	Office,			)
			AZ		i! S;	D. 18	
1		BO	INDIANA		<b>\$</b>	<b>Y</b>	
		A.E.	Z		cord		
÷	:	ICT.	<u>L</u>		d Re		
2		OFFICIAL BOND	OF		Bone		
		0	E		i. G		
			A	II.			
			~ La	. <u>s</u>	d rec	e .	
		ro C	STATE	Filed in the	and recorded in Bond Record	page	

Assistant Vice-President



(8-89)

## American States Insurance Company Indianapolis, Indiana

of Indiana, and having its principa	il office in the City of Indianap	olis, Indiana, hath made, co	nstituted and appo	inted; and does by these pres	ents make, constitute
• •	Y TINKLE, DOROTH	Y SUTPHIN, LIND	AS. PING	OR HELEN J. FLAKE	
Indianapo	lis:	and State of		Indiana	
ts-true-and*lawful Attorney(s)-i		sauthority hereby confer	ed:in=its-name, ;	place and stead, to execute	e, acknowledge and
deliver any and all bonds, recog	inizances, contracts of inder	nnity and other conditiona	lior obligatory und	dertakings, <u>provide</u> c	i, however,
that the penal s					
FIVE HUNDRED THOUS	SAND AND NOV100 (	\$500,000,000 DC	LLARS		
and to bind the Corporation the Corporation and duly attested by Attorney is executed and may be which reads as follows: "The Chairman, the Presider or Assistant Vice Presider Fact as the business of the recognizances, stipulation	reby as fully and to the same y its Secretary, hereby ratify a revoked pursuant to and by sident or any vice-president (nt) shall have power, by and whe Corporation may require ins and undertakings, whether	e extent as if such bonds ing and confirming all that authority granted by Section Country granted by Section Country and the concurrence with the concurrence any such ar by way of surety or other	were signed by the the said Attorney on 7,07 of the By-lice President; Sen any other officer person to execute arwise.	e President, sealed with the (s)-in-Fact may do in the president states alor-Vice President, Second to the Corporation, to appoint, on behalf of the Corporation	common seal of the nises. This Power of Insurance Company, lice President t'Attorneys in- n, any bonds,
INFWITNESS WHEREOF, Assistant Vice-President and its			<b>1</b>	September	dent, attested by its
	corporate sear to be never	~			
A.D. 19 <u>90</u> .	A	AN	MERICAN STATES	INSURANCE COMPANY	
ATTEST:  Assistant  STATE OF INDIANA	ti Vice:President	Ву	Jo	Second Vice President:	
COUNTY-OF MARION		Continuo		20.	
On this 14th	day of	September		, A:D;, 19: 90. , before	me personally came
3	gseph F. Heim	COLUMN OF THE			ito me iknowni, who
peing by me duly sworn#acknowl Company; that he knows the se of the Board of Directors of sale	al of said: Cornoration: that it	ne seal allixed to:the said-	nstrument is such	corporate:seal::that it:was's	can States Insurance o affixed by authority
Joseph F. Heim		t heds acquainted with	John J. K	Social di vida	knows him to be the
Assistant Vice-Presidenti of said	Corporation; and that he ex	recuted the above instrum	ent.		
		entropy	Const	my Hunde	ALPRY
STATE OF INDIANA SS	CAROLYN STRADER MARION COUNTY, S MY COMMISSION	TATE OF INDIANA		Notary Public	No.
the above and foregoing is a truin force and effect.  This Certificate may be sign COMPANY which reads as folio "All policies and other instruit or any vice-president (including and the secretary; or an assist of the Corporation; maxime for the corporati	ue and correct copy of a Powned and sealed by facsimile upows: ments of insurance issued by ng any Executive Vice Preside stant secretary, or other office acsimilies. Such signatures a r shall have ceased to be su	ver of Attorney, executed to under and by the authority of the Corporation shall be si ent, Senior Vice President, er, whose signatures, if the and facsimiles thereof shall	by said AMERICAN of Section 8:03 of a gned on behalf of a Vice President, Sectionstrument is duly be authorized and	the By-Laws of AMERICAN S the Corporation by the Chairn cond Vice President or Assiste countersigned by an authorize binding upon the Corporation strument of insurance shall h	MPANY, which: is still TATES INSURANCE nan, the President: int. Vice President) red representative: n notwithstanding;
In witness whereof, I have A.D., 19	hereunto set my hand and	affixed the seal of said Co	orporation, this -	day of	wyour
· 110-13 - 17					(1)