KNOW ALL MEN BY THE	SE PRESENTS, T	hat we, CORA	SUE MOLLICK,	as Prin	cipal	
and AMERICAN STATES I	(NSURANCE COM	PANY, as Sur	ety	******************************	•••••	
	***************************************	•••••		••••••		
are held and firmly bound unto Th	ha State of Indiana	and for the hone			••••••	
the penal sum of SEVENTY-FI				_	•	
Dollars, to the payment of which						
istrators, jointly and severally, fir						
day of October	A. D. 1991	The condition of	the above obligat	tionsis as fo	llows, viz.:	
NOW THE	CONDITION O	F THIS OBLIG	ATION IS SU	CH,	a juga salah s	
WHEREAS, the above name	ed and bounden	CORA SUE M	OLLICK	a Cantra	·Y······	
has been duly elected and commi	issioned or appoint	ed School Co	rporation		in and	
for Lake						
from the 4th	day of No	vember	.A. D. 19.91	ik litau bas	ak aucrosaorx	
k is xlulyx qualified k Ending Nov Now, if the said	rember 199	iment is				
perform and discharge his duties	NOTue	Freal Cre A	Lake Central	shau School	Corporat:	ion
and pay over on demand to the	his Documen	t is the prop	erty of	Ab		
into his hands as such. Deputy	the Lake Co	ounty Recor	der!	moneys that	may come	
during his continuance in office	; and further, tha	t the Legislature	may change, mo	dify or repe	al any law	
now in force, and exact any and Legislature, without in any way	or manner releasing	ng the said officer	or his said securi	ties on said	bond; then,	
and in that case, the above oblig and virtue in law.	ation shall cease, b	e null and void, o	therwise to be and	to remain i	n full force	
		Para	don to	2sllu	_	
	[Seal		MOLLICK		A.C. [Sear]	
	[Sel	DER'S		,	[Seal]	
		J AMERICAN	STATES INSU	RANCE CO	MPA (Seal)	
	[Seal	SEA BY	Levida .	& Ken	[Seal]	
Accepted and approved this	(1)	Moian Linda S.		ttorney-	In-Fact	
Accepted and approved this	3	uay VI	y	*******************	D. 19	
			•••••••		6	ST
		***************************************	••••••	77 - (A E
			•••••	<u> </u>	<u> </u>	777 74. 72.
State of Indiana,	Lake	Coun	ty, ss:	20 no 20 m	31 /	
Personally appeared before		lana Dannings'	· ·	-	€ 37.	r
in and for said County and State	e aforesaid,					i.
who being sworn, upon his oath s			.			
"I will support the Constitu					l faithfully,	
honestly and impartially dischar			behaty freasu	161	***************************************	
to t	the best of my skill	l and ability."	A Comment			
			sai du	Mel	uch).	
Subscribed and sworn to bef	fore me, this2	9 day .o	e Actober		, 19 91	
Form 9-1081		Mena	Torricos	(O)		ln:
9-81		······································	Lourne		/1/	رس

ACKNOWLEDGMENT OF PRINCIPAL

	INDIANA,				************		•
	on the bond appearing						
	day of						
			**********	**************	************		•••••••
			••••••	O		·····	••••••
Expira	tion date of commission,	f Notary Public	•••••	•	musi copeci	••	
	ACKI	OWLEDO	MEN	C OF SUP	ETY		
STATE: OF	Indiana	count	Y OF	Marion	••••••	, SS:	
	now American Sta			=			······································
oond this	23rd day of ebruary 14, 19	October	CSáM	, 19 91 County of B	Notar	y Public,	In and for
	ation date of commission,	Theis Dubbur	nent is		ty of		
			SEAN MOIAN			·5; y	
		T_{o} $\left\langle \begin{array}{c} \text{OFFICIAL BOND} \\ \$ \end{array} \right.$	STATE OF INDIANA	Filed in the Office,	and recorded in Bond Record	page	

Assistant Vice-President

9-1459

(8-89)



American States Insurance Company Indianapolis, Indiana

and appoint					
SA	LLY TINKLE, D	DROTHY SUTPHIN	, LINDA S. PI	NG OR HELEN J	. FLAKE
				T. 12.	
of <u>Indiana</u> ts true and lawful Attorne		and	State of	Indiana	L to avacute actuacidades
		•			
deliver any and all bonds, r	ecognizances, contracts	of indemnity and other	conditional or obligato	ry undertakings,	provided, howeve
that the penal	sum of any	one such inst	rument execu	ted hereunder	shall not exc
FIVE HUNDRED TH	DUSAND AND NO	100 (\$500.000.	00) DOLLARS		
and to bind the Corporation	thereby as fully and to	the same extent as if su	uch bonds were signed	by the President, sea	led with the common seal of
Corporation and duly attest Attorney is executed and mi	ad by its Secretary, here we be revolved oursilant!	by ratifying and confirm and by authority pract	ing all that the said Aff ach by Section 7.07 of th	orney(s)-in-Fact may diversely the American	o in the premises. This Povican States insurance Com-
wnich reads as follows:	/ -	TO COLL			
or Assistant Vice Pre	sident) shall have power	by and with the concurre	ence with the any other	officer of the Corporation	nt, Second Vice President on, to appoint Attorneys-in-
Fact as the business	of the Corporation may	require and to authorize s, whether by way of su	any such person to e	xecute; on behalf of the	Corporation, any bonds,
IN WITNESS WHERE	OF American States St	s, whether by way or sur	Satisfed these presen	ts to/berstaned by its	Vice-President, attested
Assistant Vice-President an A.D. 19_90 ATTEST:	d its corporate seal to	ischere (olleit litte duthis U	Hayik dayora	er! septe	mber
A.D. 19 <u>90</u>			AMERICAN ST	TATES INSURANCE C	OMPANY
				1	142
ATTEST:	m		Ву	Locall 7	- Leem 1
Assi	stant Vice-President		7	Second Vice-	President
					\
STATE OF INDIANA	ss				
COUNTY OF MARION		والمراجع المراجع المراجع			
On this 14th	day of	Septemb	er	, A.D., 19 9 () , before me personally
	7	TURDE	K S O STA		,
peing by me duly sworn, ack	Joseph F. He	of the above between t	and did denote and say	· that he is a Vice Presid	, to me known;
Company: that he knows the	e seal of said Corporatio	n: that the seal affixed to	the said instrument is	such corporate seal; t	hat it was so affixed by aut
of the Board of Directors of					
Joseph F. Hei	m: further	said that he is acquaint	ed with John	J. Rosich	and knows him to b
Assistant Vice-President of	said Corporation; and v	iat he executed the abo	va mstrument.		
maliamante ast nitthing manifester man a a series			روب	Alexand Ale	
		RADÈR <mark>, NOTARY P</mark> U		Notary Pi	ablic
STATE OF INDIANA		NTY, STATE OF INC			
STATE OF INDIANA	MY COMMIS	SION EXPIRES: 2,:	5;93		·
COUNTY OF MARION }					•
i, John J. Ro	osich	the Assistant Vice-Presi	ident of AMERICAN S	TATES INSURANCE C	OMPANY, do hereby certify
he above and foregoing is	a true and correct copy	of a Power of Attorney,	executed by said AME	RICAN STATES INSUF	RANCE COMPANY, Which I
n force and effect. This Certificate may be	signed and sealed by fa	csimile under and by the	authority of Section 8.	03 of the By-Laws of Al	MERICAN STATES INSURA
	follows:	sued by the Cornoration	shall be signed on beh	alf of the Corporation by	v the Chairman, the Preside
COMPANY which reads as		e President. Senior Vice F	President, Vice Presider	nt. Second Vice Preside	nt or Assistant Vice Presider
COMPANY which reads as "All policies and other in or any vice-president (inc	luding any Executive Vic		ures if the instrument is	s duiv countersianea by	ran authorized representatiy
COMPANY which reads as "All policies and other in or any vice-president (inc and the secretary, or an a of the Corporation, may	assistant secretary, or ot be facsimilies. Such sign	atures and facsimiles the	ereol shall be authorize	d and binding upon the	i Corporation notwithstandir
COMPANY which reads as "All policies and other in or any vice-president (inc and the secretary, or an of the Corporation, may in the fact that any such of	assistant secretary, or ot be facsimilies. Such sign ficer shall have ceased	atures and facsimiles the	ereol shall be authorize	d and binding upon the	Corporation notwithstandir ince shall have been actual
COMPANY which reads as "All policies and other in or any vice-president (inc- and the secretary, or an of the Corporation, may it the fact that any such of issued by the Corporation."	assistant secretary, or ot be facsimilies. Such sign ficer shall have ceased to an ''	atures and facsimiles the to be such officer at the	ereof shall be authorize time such policy or oth	d and binding upon the per-instrument of insure	ince shall have been actual
COMPANY which reads as "All policies and other in or any vice-president (inc and the secretary, or an of the Corporation, may it the fact that any such of	assistant secretary, or ot be facsimilies. Such sign ficer shall have ceased to an ''	atures and facsimiles the to be such officer at the	ereof shall be authorize time such policy or oth	d and binding upon the per-instrument of insure	ince shall have been actual