92022054

Havens Ins. Services 2705 Huy Ave P.O. Box 1689 Highland IN. 46322

3-060-381-3

BOND

KNOW ALL MEN ON THESE DOSCENTS WHAT
KNOW ALL MEN BY THESE PRESENTS, THAT
ARTIM TRANSPORT, INC.
(Name of Corporation, Partnership, etc.)
a Corporation , formed
(Corporation, Partnership, Sole Proprietorship, etc.)
and existing under the Dorougne acties of Indiana ,
whose address is 7405 Kennedy Avenue, Hammond, IM 46323
as Principal, THE OHIO CASUALTY INSURANCE COMPANY,
a corporation formed Lande Existing Renderdere laws of the State
of Ohio having its principal office
at 136 North Thind Street, Hamilton, OH 45025 as Surety, are held and
firmly bound unto the Indiana Department of Transportation, Toll
Road Division, its successors and assigns, hereinafter called the
Obligee, in the sum of Five-Hundred-and-no/100 ($$500.00$) - dollars,
in lawful money of the United States of America, for the payment
of which, well and trule to be made, we bind ourselves, our
heirs, administrators, executors, successors, and assigns,
jointly and severally, by these presents.

WHEREAS, said Principal desires the extension of credet in the use of the Indiana East-West Toll Road, and the Obligee is willing to extend such credit to said Principal for such use; provided, however, that a good and sufficient hond with a good and sufficient surety, securing the payment for the use of said East-West Toll Road, is deposited with said Obligee:

12°CK

WHEREAS, Principal has entered into a written contract with Obligee wherein the Obligee extends credit to the Principal in the use of the Indiana East-West Toll Road, which contract is by reference made a part hereof and is hereinafter referred to as "the contract."

NOW, THEREFORE, the condition of this obligation is such that if Principal in Confidence and sold and void; otherwise, it shall remain in full force and effect provided the obligation of the Surety hereunder stad Councer textee contact forth in the first paragraph hereof.

It is further understood and agreed by and between the parties hereto, that, if the said Surety shall so elect, this obligation may be cancelled by giving a sixty (60) days notice in writing, by certified mail, addressed to the Administrative Services Manager, Indiana Deposition Transportation, foll Road Division, P. O. Box 1, Granger Indiana 46530-0001, and this obligation shall be deemed to be cancelled at the expiration of the said period of sixty (60) department is further understood and agreed that notwithstanding such cancellation of this obligation, the said Surety will thereafter remain liable under the terms, conditions, and provisions of this obligation for any and all credit extended to said Principal prior to the effective date of such cancellation of this obligation.

IN WITHESS WHEREOF, the Principal and Sur	ety have
signed and sealed this instrument at	
this 25th day of March	
Artim Transport, Inc.	Principal
NOT OFFICIAL!	
This Document is the property of the Lake County Recorder! By: Taula sue Christ	Surety
Paula Sue Christ, Attorney-in-Fac	ct
6365 Castleplace Drive	
(Surety's Address)	
P. O. Box 50310	
Indianapolis, IN 46250	

.:.

CERTIFIED COPY OF POWER OF ATTORNEY

THE OHIO CASUALTY INSURANCE COMPANY

HOME OFFICE, HAMILTON, OHIO

No. 25-878

Know All Men by These Bresents: That THE OHIO CASUALTY INSURANCE COMPANY, in pursuance of authority granted by Article VI; Section 7 of the By-Laws of said Company, does hereby nominate, constitute and appoint:

Paula Sue Christ - - - - - - - - - - - - - - - - - - of Indianapolis, Indiana - - its true and lawful agent and attorney in-fact, to make, execute, sent and deliver for and on its behalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES, not exceeding in any single instance

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Company at its office in Hamilton, Ohio, in their own proper persons.

The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(s)-in-fact.



STATE OF OHIO, COUNTY OF BUTLER In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of the said The Ohio Casualty Insurance Company this 11th day of September 19 89.

NOT OFFICIAL

Assistant Secretary

ssThis Document is the property of

on the Lathe Country Recorder mber

A. D. 19 89 before

the subscriber, a Notary Public of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came John B. Vail, Assistant Secretary- - - of THE OHIO CASUALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn deposeth and saith, that he is the officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Scal of said Company, and the said Corporate Scal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

A CONTINUE OF THE PARTY OF THE

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Hamilton, State of Ohio, the day and year first above written.

Notary Public in and for Jounty of Butler, State of Ohio

Commission expires December 25 1991

This power of attorney is granted under and by authority of Article VI. Section 7 of the By-Laws of the Company, adopted by its directors on April 2, 1954, extracts from which read:

"ARTICLE VI"

"Section 7. Appointment of Attorney in-Fact, etc. The chetrman of the board, the president, any vice-president, the secretary or any assistant secretary shall be and is hereby transd with full power and authority to appoint attorneys-in-fact for the purpose of signing the name of the Company as surely to, and to execute, attach the corporate seal, acknowledge and deliver any and all bonds, recognizances, atipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation, or the oficial representative thereof, or to any county or state, or any official board or boards of county or state, or the United States of America, or to any other political sub-

This instrument is signed and scaled by facsimile as authorized by the following Resolution adopted by the directors of the Company on May 27, 1970:

"RESOLVED that the signature of any officer of the Company authorized by Article VI Section 7 of the by-laws to appoint attorneys in fact, the signature of the Secretary or any Assistant Secretary certifying to the correctness of any copy of a power of attorney and the seal of the Company may be affixed by facsimile to any power of attorney or copy thereof issued on behalf of the Company. Such signatures and seal are hereby adopted by the Company as original signatures and seal, to be valid and binding upon the Company with the same force and effect as though manually affixed."

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company, do hereby certify that the foregoing power of attorney, Article VI Section 7 of the by-laws of the Company and the above Resolution of its Board of Directors are true and correct copies and are in full force and effect on this date.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Company this and of Murcha. D., 19



Assistant Secretary

S-4300-C (Single Copy)