## AMERICAN STATES INSURANCE COMPANY 93087899 INDIANAPOLIS, INDIANA 5 LICENSE OR PERMIT BOND

KNOW ALL MEN'BY THESE PRESENTS, That we \_\_\_Aardvark\_Electrical Systems', Inc.

····				
as Principal, and the AMERICA	n states insura	ANCE COMPA		~~~\\ ~~T'C
Indianapolis, Indiana, as Surety	, are held firmly bou	nd unto A <u>111 · C</u>	lities, Töwn	
Municipalities in Lak	e County, Indi	lana.	, hereinafter calle	l Obligee; in
the penal sum of FIVE THOUS	AND AND NO/100	)		
(\$'5,:000'-00') Dollars,, for the	payment of which	well <sup>i</sup> and <sup>i</sup> trul		二。 do hereby
bind ourselves, ourtheirs, execu	tore, administrators;	successors and	assigns, jointly a	nd severally,
firmly by these presents:	OT OFFI			
Signed and sealed this 22	OT OF FI nd day of the comment is the	December Dec	er v of	, 19 <u>*93</u>
WHEREAS, the said Obile				a License or
Permit to engage in the busines	stof Electrica	al Contract	tor	· · · · · · · · · · · · · · · · · · ·
NOW THEREFORE, if the	saidiPrincipal shallii	ndemnify the O	bligee against any	loss directly
arising by reason of the failure to	comply, with the laws	, ordinances, re	solutions, rules, an	d'regulations
governing said business, then thi	s:obligation shall be v	oid; otherwise t	o!be and remain in	full force and
effect.				
PROVIDED, HOWEVER, t	hat the Surety shall h	ave the right to	terminate its liabil	ty hereunder
by serving, written notice upon	THE PERSON NAMED IN	- LIE		
Term: of Bond: Decemb			cember 22	
rerm; or bond; becent	<u>GL_22:</u>	57 ' (Ó) <u>1567</u>	,	
	\ 	2021 8 0 /		
1480	Ja	77.00	juin_	Principal
	Aar	dvaru Ele	atrical Sys	toms line
a sal				
	AME:	rican state	S INSURANCE	COMPANY'

900

Attorney-in-Fact



## American States Insurance Company INDIANAPOLIS, INDIANA

	JOHN BORCHERIM	EYER. JEAN L. RUS	SELL OR MARTHA J	SENA
·	Valparaišo:		Ind	iana
ir Is true and lawful! Attorn	ey(s)-in-Fact/ with-full, powe	r-and authority hereby confer	red; in: its name, place and	iana: di stead, to execute, acknowledge and
•				provided however.
·	- · ·	uch instrument₄ex	,	
	~			
nd to bind the Corporatio corporation and duly attes attorney is executed and make the control of the corporation and make the corporation at the	n thereby, asifully andito the ted by its Secretary, hereby nay, be revoked pursuant to a	same extent as if such bonds relifying and confirming all the by buthortly granted by Section 1997.	were signed by the Preside tipe said Atlorney(s)-in-Fact ion-7.07.01 the By-Laws of the	int; sealed with the common seal of the may do in the premises; This Power; o e American States insurance Company
fecognizances, stip	ulations and undertakings. W	hether by way of surety of oth	erwise,"	President, Second Vice President in providing to appoint Attorneys in it of the Corporation, any bonds, attested by it
		Joseph Chaunesth		
NSSISTANT VICE-President al N.D: 19 <u>. 90</u> .	ijusita corporata atanto de r			
N.D: 19 <u>. 30</u> .	ih.	A	MERICANISTATES INSURA	NCE COMPANY.
	int. Vi			1 4 9 5 5
TTEST:	istantiVice-President	В	Sacon	d Vice Plesident:
TATE OF INDIANA INDIANA INDIANA	ss			
On this 29th		June June	, A.D.,	19 '90', belőre me personally cam
		STRUERS OF	<u> </u>	
eing by me duly sworn, ac	knowledged the execution of t	he above instrument and did da	nost and say; that he is a Vic	President of American States Insurance seal; that it was so affixed by authorit
company; that he knows that the Board of Directors of	ne seal of said Corporation; it said Corporation; it	hat the seat affixed to the said he signed his name thereto u	instrument is such corporate ider like authority. And said	Biseeri; tuet il:Mes so eliked on entuolit
nosebu r. uemii	further sale	tithat he is ocque mied with	TOOM: A D. MILLON	and knows him to be the
ssistant Vice-President of	said Corporation; and that I	executed the acove thetrun	ent.	illandia.
		_		otary Public
	·, ·,,		C	(*(3)
TATEIOF INDIANA.	MARION COU SS MY COMMIS	INTY, STATE OF INDIAN SSION:EXPIRES: 10/2/92	<b>A</b> .	
OUNTY OF MARION:		oloid: Extinco, Tolelas		
John John John John John John John John	Rosich the	"AssistantiVice President of Al	MERICAN STATES INSURA	NCE COMPANY, do hereby; certify that INSURANCE COMPANY, which is at
Horceland affect	,			WS OF AMERICAN STATES INSURANCE
OMPANY which reads as	follows:			ation by the Chairman, the President
or any vice-president (in and the secretary, or an of the Corporation may	cluding any Executive Vice Pr assistant secretary, or other be facsimilies, Such signatur fficer, shall have ceased to b	esident; Senior Vice President, officer, whose signatures, if the res and facalmiles thereof shall	Vice President, Second Vice instrument is duly countersigned and binding u	President or Assistant Vice President) gned by an authorized representative pon the Corporation notwithstanding if insurance shall have been actually
		and affixed the seal of said C	orporation, this 22 usl	day of Doc on boin.
.D., 19 <u>9-Ši</u> .	• • • • • • • • • • • • • • • • • • • •	•		•
استنگسلو ۱۳ و ۱۳۰۰			<del>ئ</del> .	, Ku
14591		<del></del>	Assista	nt Vice-President