

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA 46204-1275

94018785

COUNTY UNIFIED BOND Number 01-EX-908854-10

34020703	
KNOW ALL MEN BY THESE PRESENTS:	
That Kicho Lastagarkov	SE
of 229 Elmer St., Griffith, IN 46319	Principal n
and AMERICAN STATES INSURANCE COMPANY duly authorized to transact surety	
Surety, are held and firmly bound unto Lake County in the penal sum of FIVE THOUSAND AND NO/100 (\$5,000.00) DOLLARS, lawful payment of which, well and truly to be made, we bind ourselves, our heirs, executors, adjointly and severally, firmly by these presents.	
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Signed, sealed and dated this day of March	, 19_94
Chapter 88 of IC17-2 requires the Principal to file this bond and guarantees and regulations of the County or a city or town within	the compliance with the ordinances County.
NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, That on and after the	, indemnify said Obligee against with or breach of any laws, statutes,
PROVIDED the term of the bond is continuous.	
AND, PROVIDED, the Surety may cancel this bond at any time by giving thir to the Obligee.	ty (30) days notice in writing mailed
PROVIDED FURTHER, regardless of the number of years this bond shall co of the number of premiums that shall be payable or paid, the Surety shall not be lift in the aggregate, than the amount of this bond.	
PROVIDED FURTHER, regardless of the number of licenses held by the Princip of claims that may be filed against this bond either under a single license or more that may exceed the penalty of this bond, the Surety shall not be liable hereunder for a latte amount of this bond.	in a single license, the total of which
PROVIDED FURTHER, that this bond shall be not construed to provide indemn to perform the terms of a construction contract.	ity as a result of the Principal's failure
IN WITNESS WHEREOF, the parties hereto have set their hands and seals t	he day and year above written.
hicho Lastagar	lue
AMERICAN STATE BY: Lordon W. Bates	Principal
9-1045 (1-80)	O WILLESTON



American States Insurance Company INDIANAPOLIS, INDIANA

KNOW ALL MEN BY THESE PRESENTS, that American States Insurance Company, a Corporation duly organized and existing under the laws of the State of Indiana, and having its principal office in the City of Indianapolis, Indiana, hath made, constituted and appointed, and does by these presents make, constitute and appoint BATES, JOHN C. BARBER, G. MICHAEL WINSLOW OR MARK A. BATES--------- GORDON W. Crown Point Indiana and State of its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, contracts of indemnity and other conditional or obligatory undertakings, provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed ONE HUNDRED THOUSAND AND NO/100 (\$100,000.00) DOLLARS ----and to bind the Corporation thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the common seal of the Corporation and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. This Power of Attorney is executed and may be revoked pursuant to and by authority granted by Section 7.07 of the By-Laws of the American States Insurance Company, which reads as follows: 'The Chairman, the President or any Vice-President (including any Executive Vice-President, Senior Vice-President, Second Vice-President or Assistant Vice-President) shall have power, by and with the concurrence with any other officer of the Corporation, to appoint Attorneys-in-fact as the business of the Corporation may require and to authorize any such person to execute, on behalf of the Corporation, any bonds, recognizances, stipulations and undertakings, whether by way of surety or otherwise IN WITNESS WHEREOF, American States Insurance Company has caused these presents to be signed by its Second Vice-President, attested by its Assistant Vice-President and its corporate seal to be hereto affixed this 29th day of September AMERICAN STATES INSURANCE COMPANY ATTEST: Assistant Vice-President STATE OF INDIANA SS COUNTY OF MARION 93, before me personally came On this Joseph F. Heim being by me duly sworn, acknowledged the execution of the above instrument and did depose and say; that he is a Second Vice-President of American States Insurance Company; that he knows the seal of said Corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of the Board of Directors of said Corporation; and that he signed his name thereto under like authority. And said John J. Rosich Joseph F. Heim Assistant Vice-President of said Corporation; and that he executed the above instrument. and knows him to be the IRITA BROWN, Notary Public My Commission Expires: 12:4/96 Resident of Marion County STATE OF INDIANA COUNTY OF MARION John J. Rosich, the Assistant Vice-President of AMERICAN STATES INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, which is still in force and effect. This Certificate may be signed and sealed by facsimile under and by the authority of Section 8.03 of the By-Laws of AMERICAN STATES INSURANCE COMPANY which reads as follows: All policies and other instruments of insurance issued by the Corporation shall be signed on behalf of the Corporation by the Chairman. the president or any vice-president (including any Executive Vice-President, Senior Vice-President, Vice-President, Second Vice-President, or Assistant Vice-President) and the secretary, assistant secretary, or other officer, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimilies. Such signatures and facsimiles thereof shall be authorized and binding upon the Corporation notwithstanding the fact that any such officer shall have ceased to be such officer at the time such policy or other instrument of insurance shall have been actually issued by the Corporation.

In witness whereof, I have hereunto set my hand and affixed the seal of said Corporation, this 11th day of March A.D., 19 94.

Assistant Vice-President

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENT PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — PRESENT IN ITS ENTIRETY. IF YOU HAVE ANY QUESTIONS REGARDING THE VALIDITY OF THIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIS, IN 46206-1636.