V

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA LICENSE OR PERMIT BOND

as Principal, and the AMERICAN STATES INSUI	RANCE COMPANY, with its principal office a
Indianapolis, Indiana, as Surety, are held firmly bo	ound unto All Cities, Towns and
Municipalities of Lake County, IN	, hereinafter called Obligee, in
the penal sum of Five Thousand and no/100	
\$ 5,000. Dollars, for the payment of which	ch well and truly to be made we do here
	CICIAL! the property of
The late to the Coun	about to grant to the said Principal a License o
	chout to grant to the said Principal a License of
Permit to engage in the business of General NOW THEREFORE, if the said Principal shall	indemnify the Obligee against and see directly
Permit to engage in the business of General NOW THEREFORE, if the said Principal shall arising by reason of the failure to comply with the lay	indemnify the Obligee against and Sas directly solutions, rules, the regulation
Permit to engage in the business of General NOW THEREFORE, if the said Principal shall arising by reason of the failure to comply with the law governing said business, then this obligation shall be	indemnify the Obligee against and ass directly associations, rules, the egulation
Permit to engage in the business of General NOW THEREFORE, if the said Principal shall arising by reason of the failure to comply with the law governing said business, then this obligation shall be	indemnify the Obligee against and as directly as ordinances, resolutions, rules, the regulation of the country
Permit to engage in the business of General NOW THEREFORE, if the said Principal shall arising by reason of the failure to comply with the law governing said business, then this obligation shall be effect.	indemnify the Obligee against and associations, rules, the egulation word, otherwise to be and remaining full forcean are the right to terminate its liability hereunders.



Restorations Specialists, Inc. Pr

Principal

Patricia A Lukeur

AMERICAN STATES INSURANCE COMPANY

Joyge Al Sleeper

Attorney-in-Fact



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, GEORGE F. BONE. TIMOTHY FESKO, DONNA COVERT, JOHN GARRAGE OR JOYCE A. SLEEPER -Munster 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 MILLION AND NO/100 (\$1,000,000.00) 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 percon to execute, on behalf of the Corporation, any bonds, ather officer of the Corporation, to appoint Attorneys-in-fact recognizances, stipulations and undertakings, whether by way of surety or otherwise IN WITNESS WHEREOF, American States Incurance Company at caused these presents to be signed by its Second Vice-President, attested by its A.D. 19<u>93</u> his Document is the HERICAN STATES INSUFANCE COMPANY ne Lake County Recorde ATTEST: Assistant Vice-Presiden STATE OF INDIANA COUNTY OF MARION On this 27th 93 , before me personally came __ day of Joseph F. Heim to me known, who 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 Izaid 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 Joseph F. He im further said that he is acquainted with John J. Rosich and knows him to be the Joseph F. Heim further said that he is acquainter with Joh Assistant Vice-President of said Corporation, and that he executed the above instrument. and knows him to be the CYNTHIA PINNER, NOTARY PUBLIC MARION COUNTY, STATE OF INDIANA Notary Public MY COMMISSION EXPIRES: 1/26/96 STATE OF INDIANA COUNTY OF MARION I, 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 facsimilles. 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. 3rd In witness whereof, I have hereunto set my hand and affixed the seal of said Corporation, this 95 A.D., 19_

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.

Assistant Vice-President