## AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA LICENSE OR PERMIT BOND EX-963-587

KNOW ALL MEN BY THESE PR	RESENTS, That we
New Look Construction	Company, 20420 Torrence Ave., Lynwood, IL
Principal, and the AMERICAN STA	TES INSURANCE COMPANY, with its principal office at
lianapolis, Indiana, as Surety, are h	eld firmly bound unto All cities, towns and
unicipalities etc. withi	n Lake County, IN, hereinafter called Obligee, in
penal sum of <u>Five Thousan</u>	d and 00/100
5,000) Dollars, for the paym	nent of which well and truly to be made we do hereby
d ourselves, our heirs, executors, ac	Iminstrators, successors and assigns, jointly and severally
mly by these presents.	ocument is
Signed and sealed this 4th da	y of February , 1997
	ment is the property of ranted or is about to grant to the said Principal a License or
rmit to engage in the business of	Siding Installation
	incipal shall indemnify the Obligee against any loss directly with the laws, ordinances, resolutions, rules, and regulations
verning said business, then this obliga	ation shall be void, otherwise to be and remain in full force and
ect.	
PROVIDED, HOWEVER, that the	Surety shall have the right to terminate its liability hereunder
serving written notice upon the Obl	ligee thirty (30) days in advance of its intention to do so.
Term of Bond: February	4 , 19 97 , to February 4 , 19 98
MINE S. 148 C.	Mew Look Construction Company
	Principal
Seal	By: X 250 makes
	AMERICAN STATES INSURANCE COMPANY
DEAL STANDARD	
	By Sharon L. Correra Attorney-in-Fact

MERICAN STATES
INSURANCE
INSURANCE
OF DECAMATION

## American States Insurance Company INDIANAPOLIS, INDIANA

	LEN K. FLAGLER. J	R., WILLIAM A. FLAGLER	OR SHARON L. CORRERA	
	Dolton	and Class of	Illinois	<del></del>
true and lawful At	torney(s)-in-Fact, with full powe	or and authority hereby conferred in its	Illinois name, place and steed, to execute, acknowle	edge and
			story undertakings. Drovided howe	
			ited hereunder shall not e	
NE HUNDRED	THOUSAND AND NO/J	100 (\$100.000.00) DOLL	VRS	
d duly attested by its t d may be revoked pu "The Chairman or Assistant Vice as the business	Secretary, hereby ratifying and consumer to and by authority grante in the President or any Vice-President) shall have power, by a of the Corporation may require	onfirming all that the said Attorney(s)-in-Fac d by Section 7.07 of the By-Laws of the An ident (including any Executive Vice-Presic and with the concurrence with any other o	ne President, sealed with the common seal of the Cit may do in the premises. This Power of Attorney is nerican States Insurance Company, which reads a lent, Senior Vice-President, Second Vice-President, Second Vice-President (Second Vice-President), to appoint Attorneys-in-taixecute, on behalf of the Corporation, any bond	executed as follows: ant act
IN WITNESS WHE	REOF, American States insuran	nce Company has caused these presents	to be signed by its Second Vice-President, attes	sted by its
	nt and its corporate seal to be I	hereto affixed this 14th day of		<del></del>
D. 19 <u>.95</u>	TIV: AD	<b>N</b>	TES INSURANCE COMPANY	
	Docu	ment is the proper	y or why .	
TTEST	Assistant Vice-President	County Breca	Second Vivole resident	
	Assistant Vice-Freeigent	6	Second Vice Visiteria	sies web.
ATE OF INDIANA	)			
UNTY OF MARIO	N SS			
			n K	
On this1	1th day of	November	, A.D., 19 95 , before me personi	ally came
On this	4th day of			•
		Joseph F. Heim	, to me kno	own. who
ing by me duly swo	orn, acknowledged the execut	Joseph F. Heim tion of the above instrument and did d se the seal of said Corporation; that the	epose and say; that he is a Second Vice-Pre	own, who esident of corporate
ring by me duly swo nerican States Insu- al; that it was so affili	orn, acknowledged the execut rance Company; that he know xed by authority of the Board of	Joseph F. Heim tion of the above instrument and did d se the seal of said Corporation; that the Directors of said Corporation; and that it	epose and say; that he is a Second Vice-Pre seal affixed to the said instrument is such to signed his name thereto under like authority.	own, who esident of corporate And said
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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.