

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA 46204-1275

COUNTY UNIFIED BOND Bond No. 6021019
KNOW ALL MEN BY THESE PRESENTS:
ThatBlessed, Inc.
of
Surety, are held and firmly bound unto Lake County, in the penal sum of FIVE THOUSAND AND NO/100 (\$5,000.00) DOLLARS, lawful money of the United States, for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.
Signed, sealed and dated this 10th day of C111 March 15, 45 2000.
Chapter 88 of IC17-2 requires the Principal to file this bond and guarantees the compliance with the ordinances and regulations of the County or a city or town within
NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, That if the above bounden Principal shall on and after the 10th day of March 12000, indemnify said Obligee against all loss, costs, expenses or damage to it caused by said Principal's non-compliance with or breach of any laws, statutes, ordinances, rules or regulations pertaining to such license or permit, then the above obligation shall be void; otherwise to be and remain in full force and effect.
PROVIDED the term of the bond is continuous.
AND, PROVIDED, the Surety may cancel this bond at any time by giving thirty (30) days notice in writing mailed to the Obligee.
PROVIDED FURTHER, regardless of the number of years this bond shall continue or be continued in force and of the number of premiums that shall be payable or paid, the Surety shall not be liable hereunder for a larger amount, in the aggregate, than the amount of this bond.
PROVIDED FURTHER, regardless of the number of licenses held by the Principal within the County and the number of claims that may be filed against this bond either under a single license or more than a single license, the total of which may exceed the penalty of this bond, the Surety shall not be liable hereunder for a larger amount, in the aggregate, than the amount of this bond. PROVIDED FURTHER, that this bond shall be not construed to provide indemnity as a result of the Principal's failure
to perform the terms of a construction contract.
IN WITNESS WHEREOF, the parties hereto have set their hands and seals the day and year above written.
Blessed Inc. BY: Principal Principal OF AMERICAN STATES INSURANCE COMPANY
BY: Michael D. O Connor, Agent & Attorney-in-Fact
9.1045

9-1045 (1-80)

JAMERICAN STATES MIN LINCOLN NATIONAL CORPORATION

American States Insurance Company INDIANAPOLIS, INDIANA

COCCUPIENT REAL	E. BUCHER,	MICHAEL D.	O'CONNOR O	R LINDA S. EVAN	S
Hammo		an	d State of	Indian	
s true and lawful Attorney(s)-in-		•	•	•	
eliver any and all bonds, recognis that the penal sun ONE HUNDRED THOUS!	of any one	<u>e such inst</u>	rument execu	ted hereunder	shall not exceed
nd to bind the Corporation thereby in duly attested by its Secretary, and may be revoked pursuant to an "The Chairman, the President) as the business of the Correcognizances, stipulations IN WITNESS WHEREOF, Ame	as fully and to the sar ereby ratifying and co d by authority grante ent or any Vice-Pres shall have power, by poration may requir and undertakings, v	me extent as if such be onfirming all that the sid by Section 7.07 of the didner (including any lident (including any end with the concurre and to authorize (whether by way of si	ands were signed by the aid Attorney(s)-in-Fact he By-Laws of the Amexecutive Vice-Preside ence with any other often such person to entrety or otherwise"	e President, sealed with the omay do in the premises. This prican States Insurance Cornt, Senior Vice-President, icer of the Corporation, to assect on behalf of the Corporation on behalf of the Corporation.	Power of Attorney is executed npany, which reads as follows: Second Vice-President spoint Attorneys-in-fact proration, any bonds,
ssistant Vice-President and its co					vice-riesident, attested by its
D. 19 <u>96</u>	or portate scale to			ES INSURANCE COMPAN	Y
TTEST: Assistant	This D		t is the p	roperty of	ent Cres meu
TATE OF INDIANA	/				C. Carlo
OUNTY OF MARION SS					li Circum
22-4		Bases on the		15 10 96	
On this d	ay of	August		, A.D., 19 <u></u> ,	before me personally came
		loseph F. He	nim .		to me known when
eing by me duly sworn, acknow merican States Insurance Com eal; that it was so affixed by auth	viedged the execut pany; that he know	tion of the above in vs the seal of said (strument and did de Corporation; that the	pose and say; that he is seal affixed to the said in	strument is such corporate
Joseph F. Heim	further said	that he is acquain	ted with Mark	A. Lawrence	_and knows him to be the
ssistant Vice-President of said	Corporation; and t		above instrument.	1 0	
	•	ATE OF INDIANA	hleans)	L. Callada	
	IISSION EXPIRES		100	Notary Public	ay P.
TATE OF INDIANA	NOOJON EXIT INEC				(2) Seal
OUNTY OF MARION		E 3	Seus / S		NOIAH
e above and foregoing is a true still in force and effect. This Certificate may be sign ISURANCE COMPANY which I "All policies and other instrur	and correct copy of ed and sealed by freads as follows: nents of insurance	f a Power of Attorner facsimile under and issued by the Corp	y, executed by said of by the authority of oration shall be sign	AMERICAN STATES INSI Section 8.03 of the By-Le ed on behalf of the Corpo	ws of AMERICAN STATES
the president or any vice-pres or Assistant Vice-President) ai by an authorized representat binding upon the Corporation or other instrument of insural	nd the secretary, as ive of the Corporat i notwithstanding the nce shall have bee	sistant secretary, or tion, may be facsim he fact that any suc en actually issued b	other officer, whose ilies. Such signature th officer shall have y the Corporation."	signatures, if the instrume is and facsimiles thereof ceased to be such officer	int is duly countersigned shall be authorized and at the time such policy
In witness whereast I have t		and and affixed the	seal of said Corpor	ration, this 10th	day of March
	nereunto set my ha	and and anixed the	•	•	· .
D., 198_2000	nereunto set my hi	and and amode and	•	~	TEG INBU
	nereunto set my ha	and and announce		2	CLA WELL

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.

9-1459 (2.92)