7016 (12-05)

Employers Mutual Casualty Company, an IA Corporation Dakota Fire Insurance Company, a ND Corporation EMCASCO Insurance Company, an IA Corporation Union Insurance Company of Providence, an IA Corporation Hamilton Mutual Insurance Company, an IA Corporation (Herein called the Surety) Bond No. S34-18-32		
LICENSE AND PERMIT BOND		00
PRINCIPAL (Licensee's Full Name and Address) Norton Sons Roofing Company Inc 43 Stephen Street Lemont IL 60439	Kind of License or Permit: Roofing Contractor	6 0 1 4 9
OBLIGEE: (Name of Governmental Body and Address where bond will be filed) The board of Commissioners of the County of Lake, State of Indiana and all cities, towns and municipalities within	Penal Amount of Bond: \$5,000	903
SURETY: As checked above; Administrative Office EMC Insurance Companies 717 Mulberry, Des Moines, Iowa 50309	Effective Date: 2-24-06 Expiration Date: 2-24-07	F) L 2006 F
That we, the Principal and Surety, are held and firmly bound unto the Obligee in the stated penal sum, lawful money of the United States, to be paid to said Obligee, for which payment well and fruly to be made we prince ourselves, our heirs, executors, administrators, successors or assigns, jointly and severally, by these presents. THE CONDITION OF THIS OBLIGATION IS SUCH, That, Whereas, the said Principal has been ssued a license/permit to engage in the business/activity as aforesaid within the jurisdiction of and for said Obligee. NOW THEREFORE, if said Principal shall faithfully perform the duties for which said license/permit was issued, and in all things comply with the ordinance appertaining thereto, then this bond to be void, otherwise to remain in full force and effect until the stated expiration date, unless renewed by continuation certificate.		
This bond may be terminated at any time by the Surety upon sending notice in writing by registered mail to the Obligee with whom this bond is filed, and to the Principal, and at the expiration of thirty (30) days from the mailing of said notice, this bond shall ipso facto terminate and the Surety shall thereupon be relieved from any liability for any acts or omissions of the Principal occurring after said date.		
IN WITNESS WHEREOF, the parties hereto have signed, sealed and delivered this bond the day and year first above written. Norton Sons Roofing Company Inc. Agency		
Countersigned By	Ory Downson	Surety Attorney-in-Fact

#8780

MC Insurance Companies

No. 646701

Bond # \$34-18-32

P.O. Box 712 • Des Moines, IA 50303-0712

CERTIFICATE OF AUTHORITY INDIVIDUAL ATTORNEY-IN-FACT

KNOW ALL MEN BY THESE PRESENTS, that:

- Employers Mutual Casualty Company, an Iowa Corporation
- **EMCASCO** Insurance Company, an Iowa Corporation
- Union Insurance Company of Providence, an Iowa Corporation 3.
- Minois EMCASCO insurance Company, an Iowa Corporation
- Dakota Fire Insurance Company, a North Dakota Corporation
- EMC Property & Casualty Company, an Iowa Corporation
- The Hamilton Mutual Insurance Company, an Ohio Corporation

NANCY MARKL, MARY BOWMAN, RANDY ELKIN, TODD SILVER, SUE LOFTUS, INDIVIDUALLY, VERNON HILLS, ILLINOIS

its true and lawful attorney-in-fact, with full power and authority conferred to sign, seal, and execute its lawful bonds, undertakings, and other obligatory instruments of a similar nature as follows:

and to bind each Company thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of each such Company, and all of the acts of said attorney pursuant to the authority hereby given are hereby ratified and confirmed.

The authority hereby granted shall expire

April 1, 2008

hereinafter referred to severally as "Company" and collectively as "Companies", each does, by these presents, make, constitute and appoint.

unless sooner revoked.

AUTHORITY FOR POWER OF ATTORNEY

This Power-of-Attorney is made and executed pursuant to and by the authority of the following resolution of the Boards of Directors of each of the Companies at a regularly scheduled meeting of each company duly called and held in 1999:

RESOLVED; The President and Chief Executive Officer, any Vice President, the Treasurer and the Secretary of Employers Mutual Casualty Company shall have power and authority to (1) appoint attorneys in fact and authorize them to execute on behalf of each Company and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and (2) to remove any such attorney-in-fact at any time and revoke the power and authority given to him or her. Attorneys-in-fact shall have power and authority, subject to the terms and limitations of the power-of-attorney issued to them, to execute and deliver on behalf of the Company, and to attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and any such instrument at the company. Certification as to the validity of any power-of-attorney authorized herein made by an officer of Employers Mutual Casualty Company shall be fully and in all respects binding upon this Company. The facsimile or mechanically reproduced signature of such officer, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power-of-attorney of the Company, shall be valid and binding upon the Company with the same force and affect as though manually affixed.

IN WITNESS WHEREOF, the Companies have caused these presents to be signed for each by their officers as shown, and the Corporate seals to be hereto affixed this 27th day of January

_day of Seals 1863 1953 SEAL SEAL **RUTA KRUMINS** maission Number 176255

Bruce G. Kelley, Chairman of Companies 2, 3, 4, 5 & 6; Presider of Company 1; Vice Chairman and CEO of Company 7

effrey S. Birdsley int Secretary

On this 27th day of January AD 2005 before me a Notary Public in and for the State of lowa, personally appeared Bruce G. Kelley and Jeffrey S. Birdsley, who, being by me duly sworn, did say that they are, and are known to me to be the Chairman, President, Vice Chairman and CEO, and/or Assistant Secretary, respectively, of each of The Companies above; that the seals affixed to this instrument are the seals of sale corporations; that said instrument was signed and sealed on behalf of each of the Companies by authority of their respective Boards of Directors; and that the said Bruce G. Kalley and by authority of their respective Boards of Directors; and that the said Brises G. Kelley and Jeffrey S. Birdsley, as such officers, acknowledge the execution of said instrument to be the voluntary act and deed of each of the Companies.

My Commission Expires September 30, 2006.

Notary Public in and for the State of lowa

CERTIFICATE

I, David L. Hixenbaugh, Vice President of the Companies, do hereby certify that the foregoing resolution of the Boards of Directors by each of the

Companies, and this Power of Attorney issued pursuant thereto on January 27 on behalf of Nancy Marki, Mary Bowman, Randy Elkin, Todd Silver, Sue Loftus January 27, 2005

My Comm. Exp. <u>Sept. 30, 2006</u>

are true and correct and are still in full force and effect. In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this $\frac{24 \, \text{th}}{\text{day}}$ of $\frac{\text{February}}{\text{Testimony}}$

2006

Vice-President

may call (515) 280-2689

Prescribed by the State Board of Accounts (2005)

County form 170

Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury: County Recorder.

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Signature of Declarant

Printed Name of Declarant