

STATE OF INDIAMA LAKE COUNTY FILED FOR RECORD

AMERICAN STATES INSURANCE COMPANY

2006 016987

7006 MAR - 2 AM, Hur@ Supon

MICHAEL A BROWN RECCEDED

a certain Bond No. EX861693

dated effective April 8 1993

(MONTH-DAY-YEAR)

on behalf of LARRY AUSTGEN DBA AUSTGEN CONSTRUCTION (PRINCIPAL)

and in favor of BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE, STATE OF IND & ANY CITIES & TOWNS IN LAKE COUNTY, IND (OBLIGEE)

does hereby continue said bond in force for the further period

beginning on April 8 2006

(MONTH-DAY-YEAR)

and ending on April 8 2007

Document is

(MONTH-DAY-YEAR)

Amount of bond FIVE THOUSAND DOLLARS-----(\$5,00

This Document is the property

Description of bond CARPENTRY CONTRACTOR

the Lake County Recorder!

Premium: \$75.00

PROVIDED: That this continuation certificate does not create a new obligation and is executed upon the express condition and provision that the Surety's liability under said bond and this and all Continuation Certificates issued in connection therewith shall not be cumulative and that the said Surety's aggregate liability under said bond and this and all such Continuation Certificates on account of all defaults committed during the period (regardless of the number of years) said bond had been and shall be in force, shall not in any event exceed the amount of said bond as hereinbefore set forth.

Signed and dated on

February 24 2006

(MONTH-DAY-YEAR)

AMERICAN STATÉS INSURANCE COMPANY

PO BOX 34526, SEATTLE, WA 98124

ATTORNEY-IN-FAC

J L FATTORE & ASSOCIATES INSURANCE

Agent

16260 PRINCE DR., SOUTH HOLLAND, IL 60473-3233

Address of Agent

(708) 331-7727

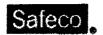
Telephone Number of Agent

(10)3

S-0157/DA 06/04

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FRP



## POWER OF ATTORNEY

Safeco Insurance Companies PO Box 34526 Seattle, WA 98124-1526

No. 12311

KNOW ALL BY THESE PRESENTS:					
That AMERICAN STATES INSURANCE COMPAN	Y, a Indiana corporation,	does hereby appoint			
******************************	**************************************	E C. GLYNN********	********	**********	*****
its true and lawful attorney(s)-in-fact, with full authorsimilar character issued by the company in the construments had been duly executed by its regularly	urse of its business, and	to bind AMERICAN Si	TATES INSURANCE	COMPANY theret	ther documents of a by as fully as if such
Five Hundred Thousand and 00/100	)				
IN WITNESS WHEREOF, AMERICAN STATES INS	SURANCE COMPANY h	as executed and attest	ted these presents		
	this	2nd	day of	June	, 2005
4			1.	1	
Stephanie Dally Watson	,		MAL	4. 7	
$\mathcal{O}$			100	acc.	
STEPHANIE DALEY-WATSON, SECRE		RTIFICATE T 15	MINE PETERO,	PRESIDENT, SUI	· · · · · · · · · · · · · · · · · · ·
"Article 8, Section 8.1 1 FIDELITY AND SURETY that purpose by the officer in charge of surety opera authority to execute on behalf of the corporation fld business On any instrument making or evic authority or on any bond or undertaking of the corporated, however, that the seal shall not be necessity. Stephanie Daley-Watson, Secretary of AMERIC corporation, and of a Power of Attorney issued pur	ations, shall each have audelity and surety bonds and dencing such appointment reporation, the seal, or a sary to the validity of any	ant, any Vice President, in athority to appoint individual other documents of sont, the signatures may facsimile thereof, may be such instrument or under the company, do here	the Secretary, and any duals as attorneys-in-fairnilar character issue be affixed by facsimil be impressed or affixed ertaking."	act or under other and by the corporations.  On any instrured or in any other and or in any other regoing extracts or	appropriate titles with in in the course of its nent conferring such manner reproduced; f the By-Laws of this
and effect.	ALLE DE	R'S			
IN WITNESS WHEREOF, I have hereunto set my	hand and affixed the fa	csimile seal of said co	prporation		
	this L	24TH	day of	FEBRUARY	, 2006
•	S S S S S S S S S S S S S S S S S S S	EAL S		ne Dalfyr Vals. LEY-WATSON, SE	

S-4910/DA2 4/05

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Prescribed by the State Board of Accounts (2005)

## 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 hereby affirm, under the penalties of perjury;

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers;

This Document is the property of

2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

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

Signature or Decarant

Printed Name of Declarant/