



Liberty Agency Underwriters™
Member of Liberty Mutual Group

2009 079175

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

Bond Department
NOV 11 AM 8:40

**ADDITION AND/OR DEDUCTION NOTICE
POSITION OR NAME SCHEDULE BOND**

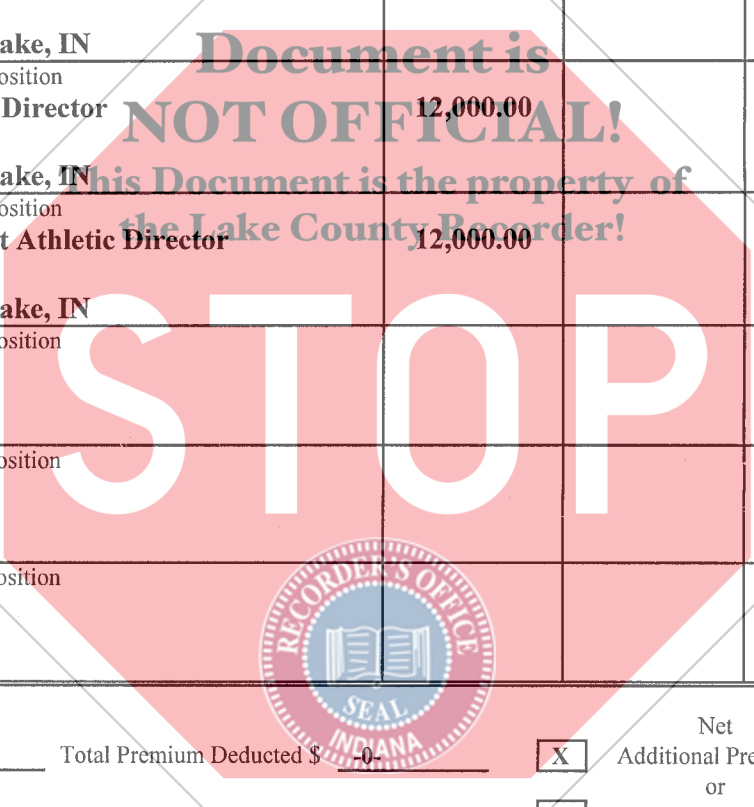
MICHAEL A. BROWN
RECORDER

Notice No. 2

The Ohio Casualty Insurance Company, as Surety upon Fidelity Bond No. **4-004-906**, in favor of **State of Indiana for the Use and Benefit of Hanover Community School Corporation** (Insured) does hereby:

- (a) Add to the schedule attached to said bond the Employee(s) or Position(s) named in column 3 hereof, in the amount(s) stated in column 4, such addition(s) to be effective on and after the date(s) stated in column 1 hereof, opposite the name(s) of such Employee(s) or Position(s).
 - (b) Deduct from said schedule the Employee(s) or Position(s) named in column 3 hereof, presently covered in the amount(s) stated in column 5, such deduction(s) to be effective on and after the date(s) stated in column 1 hereof, opposite such name(s) or position(s).
- (Where there is a change in the amount of coverage on an Employee or Position, the old amount is shown as a deduction in column 5, and the new amount is shown as an addition in column 4.)

Effective Date 1.	Item No. 2.	3.	Amount For Which Added 4.	Amount For Which Deducted 5.	Additional Premium 6.	Return Premium 7.
8/18/09	4.	Name or Position Central Office Bookkeeper Location Cedar Lake, IN	15,000.00		60.00	
8/18/09	5.	Name or Position Athletic Director Location Cedar Lake, IN	12,000.00		42.00	
8/18/09	6.	Name or Position Assistant Athletic Director Location Cedar Lake, IN	12,000.00		42.00	
		Name or Position Location				
		Name or Position Location				
		Name or Position Location				



Total Premium Added \$ 144.00 Total Premium Deducted \$ -0- Net Additional Premium or Return Premium \$144.00

The above changes have been made pursuant to request by the Insured and/or cancellation by the Underwriter.

Denise M. Reister N/C
Authorized Representative
Denise M. Reister LP

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON A RED BACKGROUND.

CERTIFIED COPY OF POWER OF ATTORNEY
THE OHIO CASUALTY INSURANCE COMPANY
WEST AMERICAN INSURANCE COMPANY

No. 42-436

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, an Ohio Corporation, and WEST AMERICAN INSURANCE COMPANY, an Indiana Corporation, pursuant to the authority granted by Article III, Section 9 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby nominate, constitute and appoint: **Rick Reister, Stephen R. Graf, Denise M. Reister, Pamela J. Dunn or Andrew L. Eickholt of Indianapolis, Indiana** its true and lawful agent (s) and attorney (s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES, not exceeding in any single instance **FIFTY MILLION (\$50,000,000.00) DOLLARS**, excluding, however, any bond(s) or undertaking(s) guaranteeing the payment of notes and interest thereon

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Companies at their administrative offices in Fairfield, Ohio, in their own proper persons.

The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(s)-in-fact.

IN WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company and West American Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of each Company this **2nd day of June, 2009**.



J. Timothy D'Errico, Assistant Secretary

STATE OF OHIO,
COUNTY OF BUTLER

On this **2nd day of June, 2009** before the subscriber, a Notary Public of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came **J. Timothy D'Errico, Assistant Secretary** of THE OHIO CASUALTY INSURANCE COMPANY and WEST AMERICAN INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn deposes and says that he is the officer of the Companies aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and the said Corporate Seals and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Hamilton, State of Ohio, the day and year first above written.



NOT OFFICIAL!
This Document is the property of the Lake County Recorder
Notary Public in and for County of Butler, State of Ohio
My Commission expires August 17, 2013.

This power of attorney is granted under and by authority of Article III, Section 9 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company and West American Insurance Company, extracts from which read:

Article III, Section 9. **Appointment of Attorneys-in-Fact.** The Chairman of the Board, the President, any Vice-President, the Secretary or any Assistant Secretary of the corporation shall be and is hereby vested with full power and authority to appoint attorneys-in-fact for the purpose of signing the name of the corporation as surety to, and to execute, attach the seal of the corporation to, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation, partnership, limited liability company or other entity, or the official representative thereof, or to any county or state, or any official board or boards of any county or state, or the United States of America or any agency thereof, or to any other political subdivision thereof

This instrument is signed and sealed as authorized by the following resolution adopted by the Boards of Directors of the Companies on October 21, 2004:

RESOLVED, That the signature of any officer of the Company authorized under Article III, Section 9 of its Code of Regulations and By-laws and the Company seal may be affixed by facsimile to any power of attorney or copy thereof issued on behalf of the Company to make, execute, seal and deliver for and on its behalf as surety any and all bonds, undertakings or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment. Such signatures and seal are hereby adopted by the Company as original signatures and seal and shall, with respect to any bond, undertaking or other written obligations in the nature thereof to which it is attached, be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby certify that the foregoing power of attorney, the referenced By-Laws of the Companies and the above resolution of their Boards of Directors are true and correct copies and are in full force and effect on this date.

IN WITNESS WHEREOF, I have hereunto set my hand and the seals of the Companies this 26th day of August, 2009



Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, bank deposit, currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call 1-513-867-3471 between 9:00 am and 4:30 pm EST on any business day.