KNOW ALL N	IEN BY THESE PRESENTS, That we,	Robert J. Volkman	บท		
of	Schererville, IN	, as Prin	, as Principal		
	and Liberty Mutual Insurance Company	of Boston, MA	, as :	Surety	
re held and firmly bound	unto The State of Indiana, and for the benefit of po	ersons concerned or aggrieved, in the pe	nal sum of Fift	een	
Thousar	nd and No Cents		(15,000.0	O) Dollars, to the payment	
f which well and truly to	e made, we bind ourselves, our heirs, executors a		• •	•	
ated this 4th.	day of <u>February</u> A	.D. 2014 . The condition of the ab	ove obligation is as fol	lows, viz.:	
	NOW THE CONDITION	N OF THIS OBLIGATION IS SU	СН,		
WHEREAS, the al	pove named and bounden Robert J. V	/olkmann			
	commissioned or appointed Town Manage				
	Schererville		•	esaid, for the term beginning	
rom the <u>1st.</u>		2014 and until his successor is d	uly qualified and endin	g <u>03/01/2015</u>	
Now, if the said _	Robert J. Volkmann			shall faithfully perform and	
ischarge his duties as such		May 24	and pay over the dem	and to he persons entitled or	
	me, all moneys that may come into his hands as s				
	ffice, and further, that the Legislature may chang pleasure of the Legislature, without in any way o				
	ease, be null and void, otherwise to be and to rem				
		·	1	N	
		MIN	1// //		
	[Se:	al] KAW	JURMM.	[Seal]	
	Doc	Robert J. Vo	lkmann		
	NOTO	FEICIAL		ra - 13	
	[Set	alj		[Seal]	
	Inis Documen	nt is the property all Liberty Mutual Insurance	Company	- [Seal]	
	the Lake U	ounty Recorder	nd	N	
	[Sea	al]	/ Kild	Sarahan Saraha	
		Renée A. Hel	d T	9185	
		nonee A. Her		~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
			8	TO THE	
** I affirm, under the	penalties for perjury, that I have taken reasonable			iless required by law. **	
Accepted and appr	oved this day of	, A.D.			
			Q	0 02 < 5	
			Ž.	ယ္အ	
	THE STATE OF THE S	DERTO			
				· · · · · · · · · · · · · · · · · · ·	
tate of Indiana,		County, ss:			
Personally appeare	d before me,				
and for said County and		Lkmann			
ho being sworn, upon his	oath says:	DIANATURE			
"I will support the	Constitution of the United States and of the State	of Indiana, and I will faithfully, honestly	y and impartially disch	arge the duties of the	
ffice of	Town Manager		to the	best of my skill and ability.	
;					
	orn to before me, this	day of			

LMS-14966 10/07

ACKNOWLEDGMENT OF PRINCIPAL

Personally ap	ppeared before me,	Robert J. Volkman	<u>n</u>
			principal upon the bond appearin
the reverse side h	ereof and acknowledges the e	xecution of said bond this,	13th day of thebrusy , 2014
			Cattle Clark
			Notary Public
1		·	Official capacity
Nep	t. $2/2011$ iration date of commission, if	Natara D. Li	
Ехр	iration date of commission, if	Notary Public	
		ACKNOWLEDGME	NT OF SURETY
TATE OF	Indiana	COUNTY OF	Lake ,ss:
	Liberty Mutual Insurance C		y Renee A. Help , its agent, surety upon the bon
-		dges the execution of said bond this	
			7000
		-	- ,1
1			
2	15 2016		Notary Public
Expin	ation date of commission, if N		Official capacity
		Docum	ent is
	· /	NOTOFF	FICIAL!
	TPI	is Dooument is	the property of
			the property of
		the Lake Count	ty Recorder:
•			
		TUTTER	
		S. O. C.	
		EAL WOLLD	VA
		THE PARTY OF THE P	

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent

AMERICAN STATES INSURANCE COMPANY INDIANAPOLIS, INDIANA POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS: That American States Insurance Company (the "Company"), a Indiana stock insurance company, pursuant

a Nagarantanga Partangan ang taong taong taong at ang at ang kanalagt diagang taong distribution taong ang ang Panggarantang ang panggarantang at at ang at an Panggarantang at ang at an			
each individually if there be more than one named, its true urety and as its act and deed, any and all undertakings, backed the state of the companies of the	oonds, recognizances and oth DOLLARS (\$ 500,000.00 ons, in pursuance of these prese	er surety obligations in the	penal sum not exceeding **) each, and the execution of such
hat this power is made and executed pursuant to and by		w and Authorization:	
ARTICLE IV - Execution of Contracts: Section	Baukkadar at st		
Any officer or other official of the Corporation limitations as the Chairman or the President r Corporation to make, execute, seal, acknowl obligations. Such attorneys-in-fact, subject to Corporation by their signature and executed, a	n authorized for that purpose may prescribe, shall appoint ledge and deliver as surety o the limitations set forth in the	o in writing by the Chairma such attorneys-in-fact, as any and all undertakings, neir respective powers of a	may be necessary to act in behalf of the bonds, recognizances and other surety attorney, shall have full power to bind the
ly the following instrument the chairman or the presider	nt has authorized the officer of	or other official named ther	ein to appoint attorneys-in-fact:
Pursuant to Article IV, Section 12 of the By-law appoint such attorneys-in-fact as may be nec surety any and all undertakings, bonds, recog	cessary to act in behalf of the	Corporation to make, ex	
hat the By-law and the Authorization set forth above are-t	rue copies thereof and are no	w in full force and effect.	
N WITNESS WHEREOF, this Power of Attorney has been states Insurance Company has been affixed thereto in Phys 2011	subscribed by an authorized omouth Meeting, Pennsylvania	officer or official of the Corp this day	oration and the corporate seal of American y of February
Z/1 ns/9)o	CHIPPENT IS SOLUTION	AMERICAN STATE	S INSURANCE COMPANY
the L	alce (SEAL)	CO. By Con was	- w. silett
OMMONWEALTH OF PENNSYLVANIA SS OUNTY OF MONTGOMERY	ADJAN .	Game	W. Elliott, Assistant Secretary
On this 11th day of February , cknowledged that he is an Assistant Secretary of An xecuted the above Power of Attorney and affixed the lirection of said corporation.	merican States Insurance Co	mpany; that he knows th	e seal of said corporation; and that he
N TESTIMONY WHEREOF, I have hereunto subscribed st above written.	my name and affixed my no	tarial seal at Plymouth Me	eting, Pennsylvania, on the day and year
LESK PAST	Notarial Seel Teresa Pastella, Notary Public Plymouth Twp., Montgomery County	By Teress	Pastella
	dy Commission Expires Mar. 28, 2013 ober, Pennsylvania Association of Notarie		resa Pastella, Notary Public
the undersigned, Assistant Secretary of American Spregoing is a full, true and correct copy, is in full force executed the said power of attorney is an Assistant Spreyided in Article IV, Section 12 of the By-laws of Amer	and effect on the date of the ecretary specially authorized	is certificate; and I do fur I by the chairman or the	ther certify that the officer or official who
This certificate and the above power of attorney may ollowing vote of the board of directors of American States			
VOTED that the facsimile or mechanically reprocessory of any power of attorney issued by the company of the com	company in connection with s		
same force and effect as though manually affi		The Control of the Co	كالكوارا وأراطين والمتراكز والمتراك والمنازل والموارين المواكم والمراج المرزان ومعارات والمورون والمواري
same force and effect as though manually am I TESTIMONY WHEREOF, I have hereunto subscribe	ed my name and affixed the	corporate seal of the sa	ild company, this