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MICHAEL B. BROWN RECORDER



## BOND 601099073

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CASH \_\_\_\_ CHARGE \_

SURETY	
KNOW ALL MEN BY THESE PRESENTS:	
That we Adrian A. Santos	of
4510 Magoun Ave., East Chicago, IN 46312	, as Principal, and
The Ohio Casualty Insurance Company ,	of 62 Maple Avenue, Keene, New Hampshire 03431
	n organized and existing under the laws of the State of New Hampshire
	unto The State of Indiana in the aggregate and non-cumulative penal
sum of Three Hundred Thousand Dollars And Ze	
(\$300,000.00 ) Dolla	lars, for the payment of which well and truly to be made, we bind ourselves, our
heirs, executors, administrators, successors and assigns	s, jointly and severally, firmly by these presents.
SIGNED, SEALED and DATED this 9th	day of December , 2015 .
THE CONDITION OF THE ABOVE OBLIGATION appointed to (or holds by operation of law) the office of	ATION IS SUCH, That Whereas, the said Principal has been elected or of East Chicago City Clerk
for a term beginning on 1/1/2016 and	nd ending on December 31, 2016 .
<b>NOW, THEREFORE</b> , If the Principal shall well, during the term aforesaid, then this obligation shall be	truly and faithfully perform all official duties required by law of such official void; otherwise to remain in full force and effect.
THIS BOND is executed by the Surety upon the fo	following express conditions:
First: The Surety may, if it shall so elect, cancel thi The City of East Chicago	is bond by giving thirty (30) days notice in writing to 4525 Indianapolis Blvd., East Chicago, IN 46312
the terms, conditions and provisions of this bond, for	ion of said thirty (30) days; the surety remaining liable, however, subject to all any act or acts covered by this bond which may have been committed by the Surety shall, upon surrender of this bond and its release from all liability preof for time this bond shall have been in force.
resulting from the failure of, or default in payment by, deposited, or may be deposited, or placed to the credit, depositories were or may be selected or designated by	ereunder for the loss of any public monies or funds occurring through or any banks or depositories in which any public monies or funds have been , or under the control of the Principal, whether or not such banks or the Principal or by other persons; or by reason of the allowances to, or olic monies or funds, any law, decision, ordinance or statute to the contrary

Third: That the Surety shall not be liable for any loss or losses, resulting from the failure of the Principal to collect any taxes, licenses, levies, assessments, etc., with the collection of which he may be chargeable by reason of his election or appointment as aforesaid.

Adrian A. Santos

I affirm, under the penalties of perjury, that I have taken reasonable care to redact each Social Security number in this document unless required by law.

The Ohio Casualty Insurance Company

Vicky VanLear

, Attorney-in-fact

## OATH OF OFFICE

OATH OF OFFICE	
State of Indiana	
County of Lake	
Advisor A. Contac	
I, Adrian A. Santos , do	
solemnly swear (or affirm) that I will support, protect and defend the Constitution of The United States and the Constitution of the State of Indiana, and that I will discharge the duties of my office of East Chicago City Clerk	
with fidelity; that I have not paid or contributed, or	
promised to pay or contribute, either directly or indirectly, any money or other valuable thing to procure my nomination or election (or appointment), except for necessary and proper expenses expressly authorized by law; that I have not knowingly violated any election law of this State, or procured it to be done by others in my behalf; that I will not knowingly receive, directly or indirectly, any money or other valuable thing for the performance or non-performance of any act or duty pertaining to my office than the compensation allowed by law. So help me God.  Adrian A. Santos	
Sworn to and subscribed before me this 28 day of Decreber, 2015.  ROSELYN A. SAKEVICIUS NOTARY PUBLIC STATE OF INDIANA QUALIFIED IN LAKE COUNTY COMMISSION EXPIRES MARCH 4, 2017	

### **POWER OF ATTORNEY**

The Ohio Casualty Insurance Company

Principal: Adrian A. Santos

Agency Name: THE BRAMAN AGENCY LLC

Obligee: City of East Chicago

\_ Agent Code: <u>131908</u>

Bond Number: 601099073

Know All Men by These Presents: That The Ohio Casualty Insurance Company, pursuant to the authority granted by Article IV, Section 12 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company, do hereby nominate, constitute and appoint: Donald A. Biesen, Joyce Dolato, Vicky VanLear, Randy C. Vale, Stacy Babich of MERRILLVILLE, Indiana its true and lawful agent(s) and attorney(ies)-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, 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 Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of said Company at their administrative offices in Keene, New Hampshire, in their own proper persons. The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(ies)-in-fact.

In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of said Company this 18th day of November, 2013.

TY INSURATE OF THE PROPERTY OF

David M. Carey, Assistant Secretary

# STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY

On this 18th day of November, 2013 before the subscriber, a Notary Public of the State of Pennsylvania, in and for the County of Montgomery, duly commissioned and qualified, came David M. Carey, Assistant Secretary of The Ohio Casualty 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 Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate Seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

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



#### COMMONWEALTH OF PENNSYLVANIA

Notarial Seal Teresa Pastella. Notary Public Plymouth Twp.. Montgomery County My Commission Expires March 28. 2017

Levesa Pastella

Notary Public in and for County of Montgomery, State of Pennsylvania My Commission expires March 28, 2017

This power of attorney is granted under and by authority of Article IV, Section 12 of the By-Laws of The Ohio Casualty Insurance Company, extracts from which read:

### ARTICLE IV - Officers: Section 12. Power of Attorney

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bond, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary.

Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

This certificate and the above power of attorney may be signed by facsimile or mechanically reproduced signatures under and by authority of the following vote of the board of directors of The Ohio Casualty Insurance Company effective on the 15th day of February, 2011:

VOTED that the facsimile or mechanically reproduced signature of any assistant secretary of the company, wherever appearing upon a certified copy of any power of attorney issued by the company in connection with surety bonds, shall 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, do hereby certify that the foregoing power of attorney, the referenced By-Laws of the Company and the above resolution of their Board 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 seal of the Company this 9th day of December , 2015



Gregory W. Davenport, Assistant Secretary