KNOW ALL MEN BY THE	SE PRESENTS, That w	ve, MICHAE	_ A TROXELL		
of Schererville, IN			, as 1	Principal	
and AME	RICAN STATES INSURAN	ICE COMPAN	IY of Seattle, W	, as S	urety
are held and firmly bound unto The State of Cents	Indiana, and for the benefit of	of persons conce	erned or aggrieved, in the		ousand Dollars And Zero Dollars, to the paymen
of which well and truly to be made, we bind dated this 1st day of	ourselves, our heirs, executor December			ally, firmly by these present e above obligation is as follow	
WHEREAS, the above named and b	NOW THE CONDITION		S OBLIGATION IS	SUCH,	o n:
has been duly elected and commissioned or			relonment Commission	· · · · · · · · · · · · · · · · · · ·	
in and for Lake	appointed Town Council W				esaid, (or the term beginning
		10.0046		•	
from the 1st day of Ja	anuary	A.D. <u>2016</u>	and until his successor	is duly qualified and ending	3 1/1/201/ 10
Now, if the said MICHAEL A TRO		eume	ent is		shall faithfully
perform and discharge his duties as such To entitled or authorized to receive the same, all					er the demand to the persons
during his continuance in office; and further.	rinal the Legislature may char	nge, modify of	reneal any law now in fo	orce, and all i	aws during the existence of
** I affirm, under the penalties for perju	void, otherwise to be inched	Seal] Seal]	MICHAEL A TROXE	SINSURANCE COMPAN	STATISED STATISED STATISED FOR RECORD STATISED FOR RECORD STATISED AND
State of Indiana, Personally appeared before me, MIC			ounty, ss:	· · · · · · · · · · · · · · · · · · ·	^
	TALL A TRUXELL				
n and for said County and State aforesaid,	- · ·				
"I will support the Constitution of the of Town Council Member Redevelopment		ate of Indiana,	and I will faithfully, hon		rge the duties of the best of my skill and ability.'
Subscribed and sworn to before me,	this	day of		·	
Form 9-1081 9-81					

M. M.

S-4966/AS 10/07

ACKNOWLEDGMENT OF PRINCIPAL STATE OF INDIANA COUNTY, SS: Personally appeared before me, MICHAEL A TROXELL principal upon the bond appearing on the reverse side hereof and acknowledges the execution of said bond this, Notary Public Official capacity Expiration date of commission, if Notary Public ACKNOWLEDGMENT OF SURETY STATE OF Comes now AMERICAN STATES INSURANCE COMPANY , its agent, surety upon the bond 2015 appearing on the reverse side hereof and acknowle day of December MATTIE SATTEMENT Document is the property NOTARY PUBLIC Lake County Recorder! Notary Public HAMILTON COUNTY, STATE OF INDIANA Official capacity EMY COMMISSION EXPIRES: 08-09-2023 OFFICIAL BOND and recorded in Bond Record Filed in the