

State Form 55946 (11-15)
Approved by State Board of Accounts, 2015
INDIANA DEPARTMENT OF INSURANCE

2016 055419

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MICHAEL B. BROWN RECORDER

Bond number 601106656

Attorne**√**in Fact

Tri-Creek School Corporation , as Principal, and The Ohio Casualty Insurance Company , as Surety, as well as all heirs, executors, and administrators of the Principal and Surety, are bound, jointly and severally, to the State of Indiana, in the amount shown in the attached schedule if subparagraph (a) is violated. In all other respects, the following conditions apply to this Public Official Bond. a) Any Public Official or Employee who is named in the schedule attached, shall faithfully perform and fulfill his or her duties, including compliance with IC 5-11 and paying over on demand to the persons entitled or authorized to receive the same, all moneys that may come into his or her hands during the term of this Public Official Bond. b) The term of this Public Official Bond is for a one (1) year term beginning on the 1st day of and ending on the 30th day of June July 2017 as provided by IC 5-4-1-18(m). This Public Official Bond 18, and any conflict between this bond and the Indiana This Public Official Bond Code shall be resolved its the property of corregeal any relevant law now in force and exact any and all laws e) The Legislature may change, modify. during the existence of this Public Official Bond, but this Public Official Bond will remain in full force and effect, except for that which was directly altered by the change in law. Automatic coverage is granted for the first thirty days of service of any Public Official or Employee succeeding one listed in the schedule. Provided, however, that the automatic coverage granted shall be void and of no effect unless during the said thirty day period a written request has been made to add the Public Official or Employee to the schedule and the Surety by written acceptance has consented thereto. Dated this 16th day of June

Alesha M. Jernas

Schedule of Position - effective (month, day, year) July 1, 2016

Schedule Number	Name of Position	Name of Public Officials or Employees	Amount of Bond
1.	Assistant Food Service Director	Julie Boyer	\$25,000.00
2.	Bookkeeper/Treasurer	Linda Pastuzak	\$25,000.00
3.	Bookkeeper	Sue L. Smetana	\$25,000.00
4.	Secretary/Bookkeeper	Robin P. McGuire	\$25,000.00
5.	Bookkeeper	Michelle Fuller	\$25,000.00
6.	Bookkeeper	Julie Darlyne Otis	\$25,000.00
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POWER OF ATTORNEY

The Ohio Casualty Insurance Company

Principal: Tri-Creek School Corporation

Agency Name: Pinnacle Insurance Group of Indiana, Inc.

Obligee: State of Indiana, Department of Insurance

Agent Code: 130125

Bond Number: 601106656

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: Joyce Helsel, Richard L. Smith, Alesha M. Jernas, Jennifer L. Whited, Barbara Hodges, Mark A. Bates of HOBART, 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.

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

mouth Meeting, State of Pennsylvania, the day and year first above IN TESTIMONY WHEREOF, I have hereunto set my hand an POCUMENT IS

COMMONWEALTH OF PENNSYLVANIA

This Do C. Commission Expires March 28, 201 PT Cholary Public in and for County of Montgomery, State of Pennsylvania TY FILE Lake County Recovery 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 Attorne

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 the hard of directors of The Ohio Casualty Insurance Company effective on the 15th day or February, 2019.

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 the in fall force and effect on this date.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Company this

day of

Gregory W. Davenport, Assistant Secretary