



**PUBLIC OFFICIAL BOND**

State Form 55947 (11-15)  
Approved by State Board of Accounts, 2012  
INDIANA DEPARTMENT OF INSURANCE

**2016 058562**

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2016 AUG 26 PM 3: 36

MICHAEL B. BROWN  
RECORDER

Bond number

3254920

Alesia Y. Pritchett

, 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 of 100,000.00, if subparagraph (b) is violated. In all other respects, the following conditions apply to this Public Official Bond.

- a) The Principal is duly elected, commissioned, appointed, or employed as Director of Business Services for School City of Hammond in the State of Indiana.
- b) The Principal shall faithfully perform and fulfill his or her duties of the position named in subparagraph (a); 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.

- c) The term of this Public Official Bond is for a one (1) year term, beginning on the 20<sup>th</sup> day of August, 2016, and ending on the 20<sup>th</sup> day of August, 2017.

- d) This Public Official Bond cannot be continued, extended, or renewed as provided by IC 5-4-1-18(m).

- e) This Public Official Bond complies with IC 5-4-1-18, and any conflict between this bond and the Indiana Code shall be resolved in favor of the statutory provisions.

- f) The Legislature may change, modify, or repeal any relevant law now in force and exact any and all laws 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.



The Ohio Casualty Insurance Company



[Signature]  
Attorney-in Fact



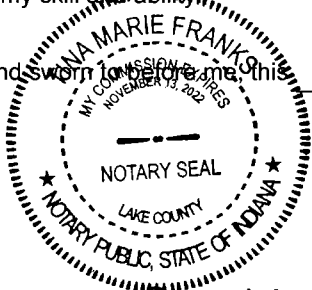
Accepted and approved this \_\_\_\_\_ day of \_\_\_\_\_

NIC  
[Signature]

State of Indiana, INDIANA County, ss:

Personally appeared before me, ALESIA V. RITCHETT in and for  
said County and State aforesaid, LAKE COUNTY, INDIANA who being  
sworn, upon his or her oath says: "I will support the Constitution of the United States and of the State of Indiana,  
and I will faithfully, honestly, and impartially fulfill the duties of the office of Director of Business Services  
to the best of my skill and ability"

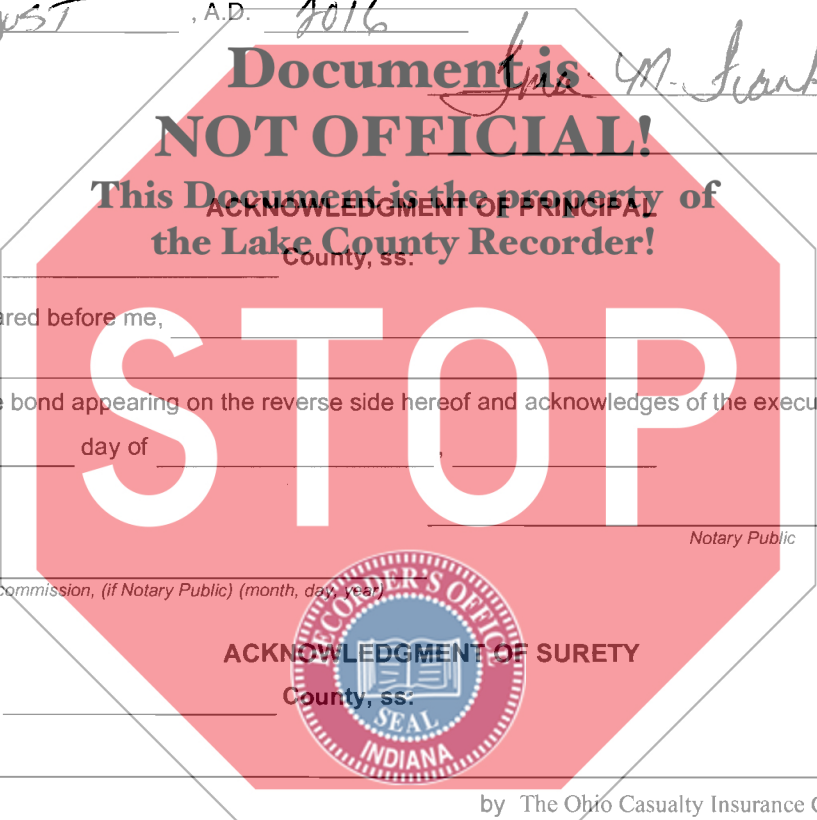
Subscribed and sworn to before me, this 26<sup>th</sup> day of August, 2016



IN WITNESS WHEREOF, I have hereunto set my hand  
affixed the seal of said STATE OF INDIANA  
at \_\_\_\_\_ this day and year above written.

I, TINA M. FRANKS of the Notary Public of Lake County, do INDIANA  
certify the above to be a true and correct copy of the official oath of ALESIA V. RITCHETT  
in and for said County as the same is endorsed on his or her commission.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said  
TINA M. FRANKS, at \_\_\_\_\_, this 26<sup>th</sup>  
day of August, A.D. 2016



State of Indiana, \_\_\_\_\_ County, ss:

Personally appeared before me,

Principal upon the bond appearing on the reverse side hereof and acknowledges of the execution of said bond

This \_\_\_\_\_ day of \_\_\_\_\_

Notary Public

Expiration date of commission, (if Notary Public) (month, day, year)

State of Indiana, \_\_\_\_\_ County, ss:

Comes now \_\_\_\_\_

by The Ohio Casualty Insurance Company

its attorney-in-fact upon the bond appearing on the reverse side hereof and acknowledges the execution of said  
bond this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public

Expiration date of commission, (if Notary Public) (month, day, year)