

PUBLIC OFFICIAL BOND
State Form 55947 (11-15)
Approved by State Board of Accounts, 2015
INDIANA DEPARTMENT OF INSURANCE
2013

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 DEC 13 AM 9: 46

MICHAEL B. BROWN RECORDER B 1117506

	Deborah A Longer	, as Principal, and
	Selective Insurance Company of America	, as Surety, as well as all heirs, executors, and
adminis	strators of the Principal and Surety, are bound, jointly a	and severally, to the State of Indiana, in the
	20. The state of t	n (b) is violated. In all other respects, the following
	ons apply to this Public Official Bond.	
a)	The Principal is duly elected, commissioned, appointed	
b)	The Principal shall faithfully perform and fulfill his or h	her duties of the position named in subparagraph
	(a); including compliance with C 5-11 and paying over to receive the same, all moneys that may come into the official Bond.	
- \	This Document is the	
c)	The term of this Public Official Bond is for one (1)	y iteeor der.
	January, 2018 and ending on the	
d)	This Public Official Bond cannot be continued, extend	ided, or renewed as provided by IC 5-4-1-18(m).
e)	This Public Official Bond complies with IC 5-4-1-18, a	and any conflict between this bond and the Indiana
	Code shall be resolved in favor of the statutory provis	fisions.
f)	The Legislature may change, modify, or repeal any re	relevant law now in force and exact any and all laws
	during the existence of this Public Official Bond, but t	this Public Official Bond will remain in full force and
	effect, except for that which was directly altered by in	ine change in law.
	E Old Control	
	JEAL.	
	WO JANA	in the state of th
		(0.1)
	My March	(Seal)
By	Attorney in Fac	Ma Junas
	orah A Longer Alesha M Jern	//
		V
Accept	ted and approved this 13th day of Novem	nber . 2017

State of Indiana,	County, ss:			
Personally appeared before me	in and	d for		
	in and who bei			
	vill support the Constitution of the United States and of the State of India	_		
and I will faithfully, honesty, and impa		aria,		
to the best of my skill and ability."				
•				
Subscribed and sworn to before me,	this, day of,			
	IN WITNESS WHEREOF, I have hereunto set my hand			
	affixed the seal of said	1		
	this day and year above written	—— I.		
	Document is			
I, of the	OT OFFICIAI to certify the above to be a true	9		
and correct copy of the official oath o	in and for said Coun	ıty		
	Positissiant is the property of			
	e Lake County Recorder!			
	NY WHEREOF, I have hereunto set my hand and affixed the seal of said day of A.D.	Ю		
, at, this	day of, A.D.			
A	CKNOWLEDGMENT OF PRINCIPAL			
State of Indiana,AKE	County, ss:			
Personally appeared before me,	DEBORAS H. LENGER			
Principal upon the bond appearing or	the reverse side hereof and acknowledges the execution of said bond	l		
This day d	November 2017/			
1	hered a . Movert			
2 25 2023	Notary Public			
Expiration date of commission, (if Notary Publi	c)(month, day, year)			
	ACKNOWLEDGMENT OF SURETY			
State of Indiana, Lake	County, ss:			
· ·		-ulaa		
Comes now Alesha M Jernas, A		-		
its agent, surety upon the bond appearing on the reverse <u>side/hereof and</u> acknowledges the execution of said				
bond this 13^{-1} day of 1	10 Vember 2017 and confirms gompliance with 10 5-4-1-18(i)		
e	The standard	<u>\~</u>		
> 22	Notacy Public			
Expiration date of commission, (if Notary Publi	ic)(month, day, year)	_		



Selective Insurance Company of America 40 Wantage Avenue Branchville, New Jersey 07890 973-948-3000

BondNo.B 1117506

POWER OF ATTORNEY

Treasurer

SELECTIVE INSURANCE COMPANY OF AMERICA, a New Jersey corporation having its principal office at 40 Wantage Avenue, in Branchville, State of New Jersey ("SICA"), pursuant to Article VII, Section 1 of its By-Laws, which state in pertinent part:

> The Chairman of the Board, President, Chief Executive Officer, any Executive Vice President, any Senior Vice President or any Corporate Secretary may, from time to time, appoint attorneys in fact, and agents to act for and on behalf of the Corporation and they may give such appointee such authority, as his/her certificate of authority may prescribe, to sign with the Corporation's name and seal with the Corporation's seal, bonds, recognizances, contracts of indemnity and other writings obligatory in the nature of a bond, recognizance or conditional undertaking, and any of said Officers may, at any time, remove any such appointee and revoke the power and authority given him/her.

does hereby appoint Alesha M Jernas

20th day of

Signed this

, its true and lawful attorney(s) in fact, full and other documents of a similar character SICA's behalf fidelity and surety bonds or undertakings in the course of 95 besiness, and to bind SICA thereby as fully as if such instruments had been duly executed by SIC Cs regularly elected officers at its principal office, in amounts or penalties not exceeding the sum of: Three Hundred Thousand Dollars (\$300,000.00)

October 2017

Signed tills
SELECTIVE INSURANCE COMPANY OF AMILIANCE COMPANY
S GRORA M
SEAL Y
By:
Brian C. Sarisky
Its SVP, Strategic Business Units, Commercial Discussion
*
STATE OF NEW JERSEY:
:ss. Branchville
COUNTY OF SUSSEX :
On this 20th day of October, 2017 before me, the understand officer, personally appeared Brian G. Sarisky, who
acknowledged himself to be the Sr. Vice President of SICA, and that he, as such Sr. Vice President, being authorized so to
do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by himself
on Sr. Vice Precident and that the same was his free act and deed and the free act and deed of SICA :0: 01A81.
Charlene Kimble
Notary Public of New Jersey Allery Smile : DOBLIC :
My Commission Expires 6/2/2021 Notary Public
WEW JEHRIN

The power of attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of SICA at a meeting duly called and held on the 6th of February 1987, to wit:

"RESOLVED, the Board of Directors of Selective Insurance Company of America authorizes and approves the use of a facsimile corporate seal, facsimile signatures of corporate officers and notarial acknowledgements thereof on powers of nees contracts of indemnity and other writing obligatory in the nature of a attorney for the execution of bonds, recogni bond, recognizance or conditional undertal

nizances, contracts of indefinity and other	writing obligatory in the nature
king."	
CERTIFICATION	JRANC

I do hereby certify as SICA's Corporate Secretary that the foregoing extract of SICA's By-Laws and Resolution force and effect and this Power of Attorney issued pursuant to and in accordance with the By-Laws is valid

Signed this 20th day of October, 2017

Michael H. Lanza, SICA Corporate Secretary

Important Notice: If the bond number embedded within the Notary Seal does not match the number in the upper right-hand corner of this Power of Attorney, contact us at 973-948-3000.

B91 (4-14)

NSTRUCTIONS: This oath of office may be given by any individual authorized to administer an oath under Indiana Code 33-42-4-1. These individuals include a notary public, a judge of a court (within the court's jurisdiction), a mayor, clerk or clerk-treasurer of a city or town (within the city or town), a circuit court clerk or county auditor (within the county), and a State Senator or State Representative (anywhere within Indiana). A signed version of this oath must be filed with the circuit court clerk of the county that contains the greatest percentage of population of the city.

Note: This oath must be filed with the circuit court clerk no later than February 1, 2016. (IC 5-4-1-1.2)

	OATH OF OFFICE
STATE OF INDIANA	Document is
COUNTY OF	LAKE NO SOFFICIAL!
he duties of the off	This Document is the property of solemnly swear (or affirm) that I will supported be Constitution of the United States of the State of Indiana, and that I will faithfully, impartially, and diligently discharge ice of City Clerk-Treasurer of the City of HOBART Indiana, of the best of my ability.
	Delabrant Louiser Printed Name 2
JBSCRIBED AND SI	NORN TO BEFORE ME THEATHE DAY OF DECEmber, 20 15.
-	Signature Signature
	William J. Lange
	Judge, Habar City CoveT
ne person administerion of commission	ng the oath is a notary public, add the county of residence and date of
UNTY OF RESIDENC	DE:

TE COMMISSION EXPIRES.