

2019 018581

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2019 MAR 28 AM 11:39

MICHAEL B. BROWN RECORDER

			Bond number	601144252
Lawre	ence Kondrat		·	, as Principal, and
The Ohio	Casualty Insurance Company		, as Surety, as well	as all heirs, executors, and
admin	istrators of the Principal and S	urety, are bound,	jointly and severally, to the	State of Indiana, in the
amour	nt of \$15,000.00	, if subpara	agraph (b) is violated. In all	other respects, the following
	ions apply to this Public Officia		montic	Director for the Waterworks
a)	The Principal is duly elected	commissioned,	appointed, or employed as	Board of Directors
b)	The Principal shall faithfully (a); including compliance wit to receive the same, all mon	h IC 5-11 and pay eys that may com	his or her duties of the posit	ion named in subparagraph persons entitled or authorized g the term of this Public
c)			<b>√</b>	n the 1st day of
0)			on the 1st day of Ja	
d)				
e)	This Public Official Bond sor	nolies with IC 5-4	-1-18, and any conflict betwe	een this bond and the Indiana
٠,	Code shall be resolved in far			
f)	The Legislature may change during the existence of this F		THILITE	ce and exact any and all laws
		SO.	14 Marie 1990	OF CHILD'S AND
By:	effect, except for that which	was directly alrered		Seal)  WDIANA
Witne		Lawrence I	Kondrat	MANA MANA
				"Management of the state of the
^		The Ohio Casualt	y Insurance Company	
ву:	rline C Shutt	By Such	2. Scibut  ert, Attorney-in-Fact	
,	ey in Fact	/		
Accept	ted and approved this	dav of	<b>,2</b> .	



State of Indiana,County, ss:	
Personally appeared before me, LAWKENCE KONEKAT	in and for
said County and State aforesaid, Lawrence Kondrat	who being
sworn, upon his or her oath says: "I will support the Constitution of the United States an	
	borrs board
to the best of my skill and ability."	of DIMMON
Subscribed and swam to before me, this	2019
OF HIGA MAN	
IN WITNESS WHEREOF, I have h	and the safe was bound
SEAL SEAL OF S	y UKK Trasuva
	nd year above written.
VDIAN NOT OFFICIAL!	•
do certify	he above to be a true
and correct copy of the official oath of	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
EM STOJIC, at 4pm, this 1st day of Janua	
- AMUKSTO,	re
ACKNOWLEDGMENT OF PRINCIPAL	
State of Indiana, County, see	
Personally appeared before me, Lawrence Kondra	
Principal upon the bond appearing on the reverse side hereof and acknowledges the extension of the second acknowledges the second acknowledges the second acknowledges the second acknowledges acknowledges the second acknowledges ackno	White DO TA MILL
This day of Average and acknowledges the ex	ecution of said bond.
The nine la	ob = 0 10
Notary Fluid	6 5 7 5
Expiration date of commission, (if Notary Public)(month, day, year)	
ACKNOWLEDGMENT OF SURETY	THE CHARLES
Commonwealth of Pennsylvania, State of Traditiona, Cumberland County, ss:	Mary Maille
· ·	
Comes now The Ohio Casualty Insurance Company by Beth A. Seibert	
its agent, surety upon the bond appearing on the reverse side hereof and acknowledges	
bond this 1st day of January, 2019 and confirms compliance	ce with IC 5-4-1-18(i)
By: Mount & B	lyr
Expiration date of commission, (if Notary Public) (month, day, year)  Nevin L. Beyer  COMMONWEALTH OF PENNSYLVANIA	
NOTARIAL SEAL	
Nevin L. Seyer. Notary Public Page 2 of 2 Camp Hill Boro, Cumberland County	
My Commission Expires Aug. 28, 2021  MEMBER, PENNSYLVANIAASSOCIATION OF NOTARIES	
WENDER' LEMMA PARTITUM ASSESSMENT	

## **POWER OF ATTORNEY**

	The Ohio Casualty Insurance Com	pany Bond Number: 601144252
Principal: Lawrence Kondrat		
Agency Name: Keystone Bonding & Surety Agenc	cy, LLC	
Obligee: State of Indiana, Town of Highland		Agent Code: <u>375651</u>
By-Laws of The Ohio Casualty Insurance Company, do here	by nominate, constitute and appoint: Nevin L. Bey ke, execute, seal and deliver for and on its b	ity granted by Article IV, Section 12 of the Code of Regulations and ver; Lydia A. Mantle; Beth A. Seibert of Camp Hill, Pennsylvania its ehalf as surety, and as its act and deed any and all BONDS, the payment of notes and interest thereon.
	ularly elected officers of said Company at their ac	n said Company, as fully and amply, to all intents and purposes, as is lministrative offices in Keene, New Hampshire, in their own proper d attorney(ies)-in-fact.
In WITNESS WHEREOF, the undersigned officer of said Company this 26th day of September, 2016.	the said The Ohio Casualty Insurance Company	has hereunto subscribed his name and affixed the Corporate Seal of
	SULTY INSURATE OF THE PROPERTY	Warid M. Carey Assistant Secretary
	Document 18	id M. Carey, Assistant Secretary
STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY	NOT OFFICIA	L!
preceding instrument, and he acknowledged the execution of	f the same cand being by me duly swem deposes a I of said Company, and the said Corporate Seal and	d for the Courfy of Montgomery, duly commissioned and qualified to be the individual and officer described in, and who executed the rid says that he is the officer of the Company aforesaid, and that the his signature as officer were duly affixed and subscribed to the said
IN TESTIMONY WHEREOF, I have hereunto set my har written.	COMMONWEALTH OF PENNSYLVANIA  Notarial Seal  Teresa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Expires March 28, 2021	Ing of Prussia, State of Pennsylvania, the day and year first above  Astella  ary Public in and for County of Montgomery, State of Pennsylvania  Commission expires March 28, 2021
may prescribe, shall appoint such attorneys-in-fact, as may undertakings, bond, recognizances and other surety obligati	or that purpose in writing by the Chairman or the F be necessary to act in behalf of the Corporation to ions. Such attoriess in-fact, subject to the limitar on of any such instruments and to attack thereto the	Casualty Insurance Company, extracts from which read:  President, and subject to such limitation as the Chairman or President make, execute, seal, acknowledge and deliver as surety any and allions set forth in their respective powers of attorney, shall have full the seal of the Corporation. When so executed, such instruments shall be seal of the Corporation.
Any power or authority granted to any representative or attoor by the officer or officers granting such power or authority		be revoked at any time by the Board, the Chairman, the Presiden
This certificate and the above power of attorney may be sig directors of The Ohio Casualty Insurance Company effective		natures under and by authority of the following vote of the board of
VOTED that the facsimile or mechanically reproduced sign issued by the company in connection with surety bonds, shall		wherever appearing upon a certified copy of any power of attorney same force and effect as though manually affixed.
CERTIFICATE  I, the undersigned Assistant Secretary of The Ohio Casualty and the above resolution of their Board of Directors are true		oregoing power of attorney, the referenced By-Laws of the Company on this date.
IN WITNESS WHEREOF, I have hereunto set my hand and	the seal of the Company thisday of	January , 2019 .
	TY INSURATE OF THE PROPERTY OF	Kenif clully— ee C. Llewellyn, Assistant Secretary