

2019 018592

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2019 MAR 28 AM 11:39

MICHAEL B. BROWN RECORDER

					Во	nd numbe	er <u>60114457</u>	4
Larry Moes							, a	s Principal, and
The Ohio Casualty Insurance Company					, as Surety, as well as all heirs, executors, and			
	istrators of the I	•	•			-		dlana, in the ects, the following
conditi	ions apply to thi	is Public Officia	Bond.				Town of Hig	hland Police
a)	The Principal	is duly elected,	commission	ed, appointe	d, or em	ployed as	Commission	ner
b)		shall faithfully p compliance with same, all mone	erform and	paying ove	er duties or on den is or her	nand to the		in subparagraph titled or authorized of this Public
c)		is Public Officia		€			on the 1st	day of
-,	January	201		nding on the		day of		, 2 020
d)								IC 5-4-1-18(m).
e)	Code shall be	resolved in fav	or of the stat	tutory provis	ions.			nd and the Indiana
f)		re may change, stence of this P		COULTER				act any and all laws
		for that which v	/S		$\delta \delta \lambda$		Seal	ORPORAL O
Witness			Larry Moes				dill	Manmannan
Budden			The Ohio C	asualty Insur	rance Cor	mpany		
Witness			By Jydia	A. Mantle, At	tornev-in-	Fact		
Attorne	ey in Fact		Lydia i	i. Manio, At	y-111-			
Accept	ted and approve	ed this	day of			, 2		



State of Indiana,LakeCounty, ss:	
Personally appeared before me, LATTY MOUSin and for	
said County and State aforesaid,	
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, honesty, and impartially fulfill the duties of the office of Police Commission	
to the best of my skill and ability."	
22 2 2 M	
Subscribed and sworm to before me, this St day of Lanuary , 2019	
IN WITNESS WHEREOF, I have hereunto set my hand SEAL 1910 At The Seal of Said Line of the Seal of Said A DEPTHY WHEREOF, I have hereunto set my hand at The Seal of Said A DEPTHY WHEREOF, I have hereunto set my hand and affixed the seal of Said WMS TO II., at 2019 IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of Said A DEPTHY TO SEAL A DEPHHY TO SEAL A DEPTHY TO SEAL A	H0
State of Indiana, Personally appeared before me, Larry Moes	
Principal upon the bond appearing on the reverse side hereof and acknowledges the execution of said bond	
This 15t day of January PUBLING PUBLING	
Notani Parlin	
Expiration date of commission, (if Notary Public)(month, day, year) ACKNOWLEDGMENT OF SURETY Commonwealth of Pennsylvania State of toxidation, Cumberland County, ss: Comes now The Ohio Casualty Insurance Company by Lydia A. Mantle	
SENTE OF TOXABLE AND COUNTY, SS:	
its agent, surety upon the bond appearing on the reverse <u>side hereof and</u> acknowledges the execution of said	
bond this 1st day of January, 2019 and confirms compliance with IC 5-4-1-18(i)	
August 28, 2021 Nevin L. Beyer Notary Public	
August 20, 2021	
Expiration date of commission, (if Notary Public)(month, day, year) COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Nevin L. Beyer, Notary Public Camp Hill Boro, Cumberland County	

Camp Hill Boro, Cumberland County
My Commission Expires Aug. 28, 2021
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

	POWER OF ATTORNEY	
Principal: Larry Moes	The Ohio Casualty Insurance Company	Bond Number: <u>601144574</u>
Agency Name: Keystone Bonding & Suret	v Agency, LLC	
Obligee: State of Indiana, Town of Highlar		Agent Code: <u>375651</u>
By-Laws of The Ohio Casualty Insurance Company true and lawful agent(s) and attorney(ies)-in-fac	e Ohio Casualty Insurance Company, pursuant to the authority granted by y, do hereby nominate, constitute and appoint: Nevin L. Beyer; Lydia A. Net, to make, execute, seal and deliver for and on its behalf as suret uding, however, any bond(s) or undertaking(s) guaranteeing the payment of	Article IV, Section 12 of the Code of Regulations and Mantle; Beth A. Seibert of Camp Hill, Pennsylvania its ty, and as its act and deed any and all BONDS,
they had been duly executed and acknowledged by	ings in pursuance of these presents, shall be as binding upon said Company of the regularly elected officers of said Company at their administrative of ear any previous authority heretofore granted the above named attorney(ies)	ffices in Keene, New Hampshire, in their own proper
In WITNESS WHEREOF, the undersigned of said Company this 26th day of September, 2016.	officer of the said The Ohio Casualty Insurance Company has hereunto s	ubscribed his name and affixed the Corporate Seal of
	David M. Carey, A	My lany
	Document 18	ASSISTANT Secretary
STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY	NOT OFFICIAL!	
came David M. Carey, Assistant Secretary of The	besides, a Notary Public of the State of Peansylvania, in and for the Cour Onio Casualty Insurance Company, to me personally known to be the indi- ecution of the same, and being by me duly sworn deposes and says that horate Seal of said Company, and the said Corporate Seal and his signature d Corporation.	Nidual and officer described in, and who executed the
IN TESTIMONY WHEREOF, I have hereunto so written.		State of Pennsylvania, the day and year first above Pastella India County of Montgomery, State of Pennsylvania expires March 28, 2021
This power of attorney is granted under and by auth	nority of Article IV, Section 12 of the By-Laws of The Ohio Casualty Insur	rance Company, extracts from which read:
may prescribe, shall appoint such attorneys-in-fact undertakings, bond, recognizances and other suret	horized for that purpose in writing by the Chairman or the President, and see may be necessary to act in behalf of the Corporation to make, executly obligations. Such attorneys in-fact, subject to the limitations set forthed execution of any such instruments and to attach thereto the seal of the Co	e, seal, acknowledge and deliver as surety any and all in their respective powers of attorney, shall have full
Any power or authority granted to any representati or by the officer or officers granting such power or	ve or attorney-in-fact under the provisions of this article may be revoked authority.	at any time by the Board, the Chairman, the President
This certificate and the above power of attorney madirectors of The Ohio Casualty Insurance Company	hay be signed by facsimile or mechanically reproduced signatures under a reflective on the 15th day of February, 2011:	and by authority of the following vote of the board of
VOTED that the facsimile or mechanically reprodissued by the company in connection with surety bo	luced signature of any assistant secretary of the company, wherever appeared, shall be valid and binding upon the company with the same force and	earing upon a certified copy of any power of attorney deffect as though manually affixed.
and the above resolution of their Board of Directors	o Casualty Insurance Company, do hereby certify that the foregoing powers are true and correct copies and are in full force and effect on this date.	
IN WITNESS WHEREOF, I have hereunto set my	hand and the seal of the Company this lst day of January	. 2019 .



Renee C. Llewellyn, Assistant Secretary