## **State of Florida**

### **Secretary of State**

#### **Division of Elections**

500 South Bronough Street, Room 316 Tallahassee, Florida 32399-0250

## **Public Official Bond**

County of		
KNOW ALL MEN BY THES	SE PRESENTS, That	
as Principal, and		(Official's Name)
as Surety, are bound unto the Governor	of the State of Florida,	and his successors in office, in the
sum of \$		
executors, administrators, successors and	-	
THE CONDITION OF THIS	OBLIGATION IS S	UCH, That, whereas, said official
was elected appointed		to hold this office
for a term beginning	and ending	and until
his/her successor is qualified according t	o the Constitution and	Laws of the State of Florida.
NOW, THEREFORE, If the of	ficial shall faithfully n	erform the duties of his/her office
as provided by law, this obligation is voi		
us provided of raw, and conguiton is ver	<b>.</b>	
	X	
	(Signati	ure of Official)
Signed and Sealed this	day of	, 20
		(Address of Main Surety Company)
		(Name of Local Bonding Company)
THE		
S: KW + 7.72		(Address of Local Bonding Company)
(SEAL)	Ву Х	ul Riche
Z =		(Signature of Licensed Resident Agent)
TO CORPORATE DESCRIPTION OF THE PROPERTY OF TH	(Socia	ll Security Number of Licensed Resident Agent)
		(Type Name of License Resident Agent)
The above is approved this	_day of	<u>, 20                                    </u>
Signature:		
Approved by:		

1bond.doc (2/04))

# POWER OF ATTORNEY

Direct Inquiries/Claims to: THE HARTFORD BOND, T-11 One Hartford Plaza

Hartford, Connecticut 06155 Bond.Claims@thehartford.com call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:	Agency Code:		
Hartford Fire Insurance Company, a corporation duly organized	d under the laws of the State of Connecticut		
Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana			
Hartford Accident and Indemnity Company, a corporation dul	ly organized under the laws of the State of Connecticut		
Hartford Underwriters Insurance Company, a corporation dul	ly organized under the laws of the State of Connecticut		
Twin City Fire Insurance Company, a corporation duly organize	ed under the laws of the State of Indiana		
Hartford Insurance Company of Illinois, a corporation duly or	ganized under the laws of the State of Illinois		
Hartford Insurance Company of the Midwest, a corporation d	fuly organized under the laws of the State of Indiana		
Hartford Insurance Company of the Southeast, a corporation	n duly organized under the laws of the State of Florida		
having their home office in Hartford, Connecticut (hereinafter collectively referr	red to as the "Companies") do hereby make, constitute and appoint		
its true and lawful Attorney-in-Fact, to sign its name as surety(ies) only as following bond, undertaking, contract or written instrument: Bond No.	delineated above by , and to execute, seal and acknowledge the		
in the amount of See Bond Form(s) on behalf of Company in its business of g contracts and executing or guaranteeing bonds and undertakings required or p			
In Witness Whereof, and as authorized by a Resolution of the Boshave caused these presents to be signed by its Assistant Vice President and Secretary. Further, pursuant to Resolution of the Board of Directors of the Coand will be bound by any mechanically applied signatures applied to this Power	ompanies, the Companies hereby unambiguously affirm that they are		
(C)	CONTROL OF THE PARTY OF THE PAR		
Shuby Wiggins	Joseph & Rotins		
Shelby Wiggins, Assistant Secretary	Joelle L. LaPierre, Assistant Vice President		
STATE OF FLORIDA Ss. Lake Mary			
COUNTY OF SEMINOLE			
On this 20th day of May, 2021, before me personally came Joelle LaPi (s)he resides in Seminole County, State of Florida; that (s)he is the Assistant Vice executed the above instrument; that (s)he knows the seals of the said corporations that they were so affixed by authority of the Boards of Directors of said corporations.	ns; that the seals affixed to the said instrument are such corporate seals		
	Jessica Ciccone,  Jessica Ciccone  My Commission HH 122280  Expires June 20, 2025		
I, the undersigned, Assistant Vice President of the Companies, DO F copy of the Power of Attorney executed by said Companies, which is still in full Signed and sealed in Lake Mary, Florida.	HEREBY CERTIFY that the above and foregoing is a true and correct of the structure of the s		
Signed and sealed in Lake Way, 1 Iolida.	DIAM 1979		

Keith Dozois