



**VERIFICATION CERTIFICATE FOR  
INDEFINITE TERM BOND**

The Ohio Casualty Insurance Company \_\_\_\_\_, Surety upon:

a certain Bond No.: 601119602

Cross Ref Bond No.: \_\_\_\_\_

dated effective: May 15, 2017

on behalf of: Heather Phillips

and in favor of: Pana Community Unit School District #8

Amount of bond: \$16,250.00

Description of bond: Special Issue Bond - Working Cash Bond: Treasurer, Bookkeeper

Current Bond Term: May 15, 2021 to May 15, 2022

and that the said bond remains in effect, subject to all its agreements, conditions and limitations, and ends only with the cancellation of said bond or other legal termination.

Signed and dated on: February 3, 2021

Surety Name: The Ohio Casualty Insurance Company

By: Leah Wilkinson

Agency Name: Leah Wilkinson - Attorney in Fact  
RAMZA INSURANCE GROUP INC

Agency Address: 127 S BLOOMINGTON ST, STREATOR, IL 61364-2911

Agency Telephone: (815) 672-7341





This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

The Ohio Casualty Insurance Company
POWER OF ATTORNEY

Principal: Heather Phillips
Agency Name: RAMZA INSURANCE GROUP INC Bond Number: 601119602
Obligee: Pana Community Unit School District #8
Bond Amount: (\$16,250.00) Sixteen Thousand Two Hundred Fifty Dollars And Zero Cents

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint Leah Wilkinson in the city and state of STREATOR, IL, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 26th day of September, 2016.



The Ohio Casualty Insurance Company

By: [Signature]
David M. Carey, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email HOSUR@libertymutual.com.

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 26th day of September, 2016, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporation by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal
Teresa Pastella, Notary Public
Montgomery County
My commission expires March 28, 2025
Commission number 1126044
Member, Pennsylvania Association of Notaries

By: [Signature]
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.
Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 3rd day of February, 2021.



By: [Signature]
Renee C. Llewellyn, Assistant Secretary



Warrenville  
27201 Bella Vista Pkwy Ste 310  
Warrenville, Illinois 60555  
+1 (630) 393-7961 Fax: +1 (866) 547-4877

Registered: February 3, 2021  
Product Segment: Commercial Transactional  
Producer Name: LINDA HAYS  
Agency Code: 977032

**Principal:**  
Heather Phillips  
205 Grant St  
Pana, Illinois 62557

**Account:**

**Agency:**  
RAMZA INSURANCE GROUP INC  
PO BOX460  
STREATOR, Illinois 61364-0460

**Invoiced To:**  
RAMZA INSURANCE GROUP INC  
PO BOX460  
STREATOR, Illinois 61364-0460

**Obligee:**  
Pana Community Unit School District #8  
14 E. Main St  
Pana, Illinois 62557

**Additional Obligee:**

**LMS Bond Number:** 601119602  
**Bond Period:** 05/15/2021 to 05/15/2022  
**Days Notice:** 30 Days  
**Company:** The Ohio Casualty Insurance Company  
**Bond Amount:** 16,250 USD  
**LMS Bonded Amount:** 16,250 USD

**Cross Reference:**  
**Transaction Eff. Date:** 05/15/2021  
**Premium Period:** 05/15/2021 to 05/15/2022  
**Renewal Type:** Continuous Until Canceled  
**Class Code:** 101  
**Co-surety:**

**Bond Description:**  
Special Issue Bond - Working Cash Bond: Treasurer, Bookkeeper

**Agency Comments:**

**Bond Premium:** 100.00 USD

**Ramza Insurance Group, Inc.**  
 127 S. Bloomington Street  
 Streator, IL 61364  
 Phone: 815-672-3133

**Pana CUSD #8**  
 14 East Main Street  
 Pana, IL 62557

<b>INVOICE NO. 24873</b>		Page 1
ACCOUNT NO.	OP	DATE
PANAC-1	LW	02/03/2021
<b>BOND</b>		
POLICY #	LOAN #	
601119602		
COMPANY		
Liberty Mutual Insurance		
PRODUCER		
Craig S. Ramza, Sr.		
EFFECTIVE	EXPIRATION	BALANCE DUE ON
05/15/2021	05/15/2022	05/15/2021
AMOUNT PAID		AMOUNT DUE
		\$100.00

Itn #	Due Date	Trn	Type	Description	Amount
251738	05/15/21	REN	BOND	Bond Rnwll #601119602 Phillips	\$100.00

Invoice Balance: \$100.00



VERIFICATION CERTIFICATE FOR INDEFINITE TERM BOND

The Ohio Casualty Insurance Company, Surety upon:

a certain Bond No.: 999047633

Cross Ref Bond No.:

dated effective: June 4, 2020

on behalf of: Heather Phillips

and in favor of: Pana CUSD #8

Amount of bond: \$375,000.00

Description of bond: Treasurer Bond: Special Issue For Working Cash

Current Bond Term: June 4, 2021 to June 4, 2022

and that the said bond remains in effect, subject to all its agreements, conditions and limitations, and ends only with the cancellation of said bond or other legal termination.

Signed and dated on: February 3, 2021

Surety Name: The Ohio Casualty Insurance Company

By: Leah Wilkinson

Leah Wilkinson - Attorney in Fact

Agency Name: RAMZA INSURANCE GROUP INC

Agency Address: 127 S BLOOMINGTON ST, STREATOR, IL 61364-2911

Agency Telephone: (815) 672-7341





This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

The Ohio Casualty Insurance Company
POWER OF ATTORNEY

Principal: Heather Phillips
Agency Name: RAMZA INSURANCE GROUP INC
Obligee: Pana CUSD #8
Bond Number: 999047633
Bond Amount: (\$375,000.00) Three Hundred Seventy-five Thousand Dollars And Zero Cents

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint Leah Wilkinson in the city and state of STREATOR, IL, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 26th day of September, 2016.



The Ohio Casualty Insurance Company
By: David M. Carey, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email HOSUR@libertymutual.com.

STATE OF PENNSYLVANIA
COUNTY OF MONTGOMERY ss

On this 26th day of September, 2016, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal
Teresa Pastella, Notary Public
Montgomery County
My commission expires March 28, 2025
Commission number 1126044
Member, Pennsylvania Association of Notaries

By: Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 3rd day of February, 2021.



By: Renee C. Llewellyn, Assistant Secretary

Report of Renewal - Commercial



Warrenville  
27201 Bella Vista Pkwy Ste 310  
Warrenville, Illinois 60555  
+1 (630) 393-7961 Fax: +1 (866) 547-4877

Registered: February 3, 2021  
Product Segment: Commercial Transactional  
Producer Name: LINDA HAYS  
Agency Code: 977032

**Principal:**  
Heather Phillips  
205 Grant St  
Pana, Illinois 62557

**Account:**

**Agency:**  
RAMZA INSURANCE GROUP INC  
PO BOX460  
STREATOR, Illinois 61364-0460

**Invoiced To:**  
RAMZA INSURANCE GROUP INC  
PO BOX460  
STREATOR, Illinois 61364-0460

**Obligee:**  
Pana CUSD #8  
14 E Main St  
Pana, Illinois 62557

**Additional Obligee:**

**LMS Bond Number:** 999047633  
**Bond Period:** 06/04/2021 to 06/04/2022  
**Days Notice:** 30 Days  
**Company:** The Ohio Casualty Insurance Company  
**Bond Amount:** 375,000 USO  
**LMS Bonded Amount:** 375,000 USO

**Cross Reference:**  
**Transaction Eff. Date:** 06/04/2021  
**Premium Period:** 06/04/2021 to 06/04/2022  
**Renewal Type:** Continuous Until Canceled  
**Class Code:** 101  
**Co-surety:**

**Bond Description:**  
Treasurer Bond: Special Issue For Working Cash

**Agency Comments:**

**Bond Premium:** 375.00 USO

**User:** Ryan, Lora

**Printed:** 02/03/2021

**Ramza Insurance Group, Inc.**  
 127 S. Bloomington Street  
 Streator, IL 61364  
 Phone: 815-672-3133

**Pana CUSD #8**  
 14 East Main Street  
 Pana, IL 62557

<b>INVOICE NO. 24874</b>		Page 1
ACCOUNT NO.	OP	DATE
PANAC-1	LW	02/03/2021
<b>BOND</b>		
POLICY #	LOAN #	
999047633		
COMPANY		
Liberty Mutual Insurance		
PRODUCER		
Craig Ramza II		
EFFECTIVE	EXPIRATION	BALANCE DUE ON
06/04/2021	06/04/2022	06/04/2021
AMOUNT PAID		AMOUNT DUE
		\$375.00

Itm #	Due Date	Trn	Type	Description	Amount
251739	06/04/21	REN	BOND	Bond Rnwl #999047633 Phillips	\$375.00
<b>Invoice Balance:</b>					<b>\$375.00</b>