

3214 Chicago Drive, Hudsonville, MI 49426 Phone: 616.662.3900 Fax: 616.662.4460

**POWER OF ATTORNEY** 

1,7

POWER NUMBER 100-10651216

MAXIMUM AMOUNT \* \$100,000.00 \* \*

BY

TAX I.D. NO: 35-1372324

N.A.I.C. NO. 32867

VOID IF NOT EXECUTED BY Jun – 30 – 2021

KNOW ALL MEN BY THESE PRESENTS that Universal Fire & Casualty Insurance Company, a corporation duly organized and existing under the laws of the State of Indiana, does hereby constitute and appoint the below named executing Agent as its true and lawful Attorney-in-Fact in its name, place and stead, to execute, seal and deliver on its behalf, a surety bail bond for the below named Defendant. In witness whereof, Universal Fire & Casualty Insurance Company has caused this instrument to be signed and sealed by its duly authorized officer.

This Power of Attorney is for use with Bair Bonds for State, County and Municipal Courts only (not varid in Federal Court) and not to exceed the above stated amount. This power must be filed with the bond as a permanent court record to obligate the surety, for court appearance only, of the named Defendant. This Power shall not obligate the surety for Defendant's future lawful conduct, court imposed conditions, restrictions or fines, costs, restitution or any other circumstances not specifically related to court appearance. This Power is void if its original format has been altered, if it exceeds the maximum amount listed, is used with other Universal Powers to cover one bond amount, or is used by an individual who is not authorized to execute surety bail bonds on behalf of Universal Fire & Casualty Insurance Company,

BOND AMOUNTS # 100 1000 CODATE 11 1 2 3	
BOND AMOUNT \$ # 100,000 COPATE - 411413 DEFENDANT 106 ALBERTY POHECT	, All
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CITY & STATE	<u>Wild</u> Ye
CASE NO. 2707 217142	
APPEARANCE DATE/TIME	
EXECUTING AGENT TOUSSEN HOOM 4556-33 AGENCY SX: SOULS DOCTOR PHONE 4372330	_MP
AGENCY CORIG. PHONE COSTS OF THE PROPERTY OF T	<b>2</b> 01

UNIVERSAL FIRE & CASUALTY INSURANCE COMPANY

Richard Klimaszewski, President

1976

SECURITY **FEATURES** MUST BE PRESENT SEE LIST ON BACK

COURT COPY

BAIL BOND FORM - APPEARANCE ONLY	(also known as FORM 702)	APR 1 4 2021
STATE OF MINNESOTA, Plaintiff	Court File No.:	CR21746D
·	Bond Amount One Hundred The	oused (\$ 100,000)
Charges: Mush suchter and Description (including amendments and lesser included charges)		
BOND OBLIGATION AND CONDITIONS		
The Defendant, as Principal, and Universal Fire and Casualty Insurance Company, as Surety, above named District Court the Bond Amount if the Defendant fails specified by the Court to answer the charge(s) identified in this Bond charges.	hereby agree and acknowledge that they to personally appear in Court at such tim	es and on such dates as
<ol> <li>The obligation of the Surety becomes null and void upon the occurred.</li> <li>The dismissal of the charge(s) identified on this form and at 2.</li> <li>The finding or verdict that Defendant is not guilty of the ch.</li> <li>The sentencing of Defendant (whether imposed or stayed) vaccompanying Bond.</li> </ol>	ccompanying Bond; arge(s) identified on this form and accom	
This is an appearance bond only and does not guarantee compliance Defendant by the Court. This bond shall not be used for payment of imposed upon the Defendant by the Court.	with conditional release requirements im	ancial obligation(s)
Defendant/Principal signature	Printed Name	411412021 Date
	- Timed Name	o de la companya del companya de la companya del companya de la co
Attorney in Fact for Surety Company (Bail Bond Agent) signature	Acussen Haron Printed Name	Ul (4/2 Date
ACKNOWLEDGMENT OF		O
This instrument remains valid for 180 days after the date signed		Owner/President/CEO).
This instrument acknowledges that the above-named Attorney in Fac	ci, donssen Haron	(print name)
is employed by Bail Bonds Doctor, Inc. and is authorized to post bo	onds on behalf of Universal Fire and Ca	sualty Insurance
Company.		
Jania Opr	President	3/29/2021
Bail Bond Agency (e.g., Owner/President/CEO)	Job Title	Date