

04-722-CD
IN RE: CLEARFIELD COUNTY INVESTIGATORS-RUSSELL G.
TRIPONEY

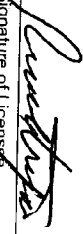
2004-722-(1)


FILE #20 04 722-CD

CLEARFIELD COUNTY PRIVATE DETECTIVE LICENSE
ISSUED TO

Russell G. Trippery

Expires: May 26, 2024





Signature of Licensee

Prothonotary

2004-722-CD

Partnership, Association or Corporation Private Detective License Renewal Form

Name of Partnership, Association or Corporation CLEARFIELD COUNTY INVESTIGATORS County Of Clearfield

Federal Identification No. 25-1442431

Address of Principal Place of Business:
624 Arrowhead Way
Clearfield, PA 16830

FILED
0/1:51am 1AR
MAY 03 2019
NOCC
BRIAN K. SPENCER
PROTHONOTARY & CLERK OF COURTS

Branch office(s) address(es): *(Attach separate sheet for additional offices.)*

N/A

On a separate sheet state the Name, Address, Date of Birth and Social Security Number of each individual composing the partnership, association or corporation.

Has any member of the partnership, association or corporation ever been arrested or convicted of a criminal offense in this state or any other state? ☒ no, ☐ yes *(If yes, give details on separate sheet.)*

Date current license issued: 5 / 26 / 2014 Date of expiration 5 / 26 / 2019
month day year month day year

The undersigned hereby affirm that the foregoing information is true and correct to the best of said persons' knowledge, information and belief; said affirmation being made subject to penalties prescribed by 18 Pa. C.S.A. Sec. 4904, unsworn falsifications to authorities. By signing this affirmation the undersigned further certifies that they are familiar with the Private Detective Act of August 21, 1953, P.L. 1273, Sec. 1, as amended, and warrant that this application is in compliance with the provisions of the Act. *(Attach separate sheet for additional signatures.)*

Russell G. Triponey 5-3-19
Signature Date

Signature Date

Signature Date

Signature Date

For use by County

Criminal records check:

☐ County

☐ State

☐ NCIC

☐ Check if conviction found

☒ License renewal Approved

Date License Renewed 5/26/2019

New License expiration date 5/26/2024

☐ License renewal Not Approved

Date submitted to Court for hearing _____

☐ Fee Paid 500.00

Signature BK Spencer
Clerk of Courts

Name, Address, Date of Birth and Social Security Number of individual
composing business of CLEARFIELD COUNTY INVESTIGATORS:

Russell G. Triponey
624 Arrowhead Way
Clearfield, PA 16830

Date of Birth: May 11, 1938

Social Security Number: 188-30-0331



National Bond Center
350 E. 96th Street
Indianapolis, Indiana 46240
+1 (888) 8442663 Fax: +1 (866) 5474883

CONTINUATION CERTIFICATE

To be attached to and form a part of surety bond number LSF017267 (the "Bond"), cross reference bond number 3824897, for Private Detective Bond
dated the 26th day of May, 2004, in the penal sum of \$ 10,000.00 issued by
The Ohio Casualty Insurance Company as surety (the "Surety"), on behalf of
Clearfield County Investigators as principal (the "Principal"), in favor of Clearfield County Courthouse, as obligee (the "Obligee").

The Surety hereby certifies that this Bond is continued in full force and effect until the 26th day of
May, 2024, subject to all covenants and conditions of said Bond.

Said Bond has been continued in force upon the express condition that the full extent of the Surety's liability under said Bond, and this and all continuations thereof, for any loss or series of losses occurring during the entire time the Surety remains on said Bond, shall in no event, either individually or in the aggregate, exceed the penal sum of the Bond.

IN WITNESS WHEREOF, the Surety has set its hand and seal this 25th day of February, 2019

The Ohio Casualty Insurance Company
(Surety)
By: Timothy A. Mikolajewski
Timothy A. Mikolajewski
Assistant Secretary - Liberty Mutual Surety



Partnership, Association or Corporation Private Detective License Renewal Form

County Of Clearfield
Name of Partnership,
Association or Corporation CLEARFIELD COUNTY INVESTIGATORS 5

Federal Identification No. 25-1442431

04-722-CD

FILED

MAY 08 2014

Address of Principal Place of Business:

624 Arrowhead Way

Clearfield, PA 16830

BRIAN K. SPENCER
PROTHONOTARY & CLERK OF COURTS

0/1142/1519

pd. 500.00

Branch office(s) address(es): (Attach separate sheet for additional offices.)

N/A

On a separate sheet state the Name, Address, Date of Birth and Social Security Number of each individual composing the partnership, association or corporation.

Has any member of the partnership, association or corporation ever been arrested or convicted of a criminal offense in this state or any other state? ☒ no, ☐ yes (If yes, give details on separate sheet.)

Date current license issued: 5 / 26 / 09
month day year

Date of expiration 5 / 26 / 14
month day year

The undersigned hereby affirm that the foregoing information is true and correct to the best of said persons' knowledge, information and belief; said affirmation being made subject to penalties prescribed by 18 Pa. C.S.A. Sec. 4904, unsworn falsifications to authorities. By signing this affirmation the undersigned further certifies that they are familiar with the Private Detective Act of August 21, 1953, P.L. 1273, Sec. 1, as amended, and warrant that this application is in compliance with the provisions of the Act.

(Attach separate sheet for additional signatures.)

Signature Russell G. Triponey

Date 5-6-14

Signature

Date

Signature

Date

Signature

Date

For use by County

Criminal records check:

☒ County

☐ State

☒ NCIC

☐ Check if conviction found

☒ Fee Paid 500.00

☒ License renewal Approved

Date License Renewed 5/8/2014

New License expiration date 5/26/2019

☐ License renewal Not Approved

Date submitted to Court for hearing

Signature

Clerk of Courts

Name, Address, Date of Birth and Social Security Number of individual
composing business of CLEARFIELD COUNTY INVESTIGATORS:

Russell G. Triponey
624 Arrowhead Way
Clearfield, PA 16830

Date of Birth: May 11, 1938

Social Security Number: 188-30-0331



275 Grandview Ave. Suite 102
Camp Hill, PA 17011

CONTINUATION CERTIFICATE

To be attached to and form a part of surety bond number LSF017267 (the "Bond"), cross reference bond number 3824897, for Private Detective Bond
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The Ohio Casualty Insurance Company as surety (the "Surety"), on behalf of
Clearfield County Investigators as principal (the "Principal") in favor of Clearfield County Courthouse, as obligee (the "Obligee").

The Surety hereby certifies that this Bond is continued in full force and effect until the 26th day of
May, 2019, subject to all covenants and conditions of said Bond.

Said Bond has been continued in force upon the express condition that the full extent of the Surety's liability under said Bond, and this and all continuations thereof, for any loss or series of losses occurring during the entire time the Surety remains on said Bond, shall in no event, either individually or in the aggregate, exceed the penal sum of the Bond.

IN WITNESS WHEREOF, the Surety has set its hand and seal this 25th day of February, 2014

The Ohio Casualty Insurance Company

(Surety)

By:

Timothy A. Mikolajewski

Timothy A. Mikolajewski
Assistant Secretary - Liberty Mutual Surety



FILED

MAY 08 2014

**BRIAN K. SPENCER
PROTHONOTARY & CLERK OF COURTS**

Date: 5/15/2009

Clearfield County Court of Common Pleas

NO. 1929479

Time: 03:37 PM

Receipt

Page 1 of 1

Received of: Clearfield County Investigators (subject \$ 500.00

Five Hundred and 00/100 Dollars

Case: 2004-00722-CD	Subject: IN RE: Clearfield County Investi	Amount
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Renewal of Private Detective License		500.00
--------------------------------------	--	--------

Total:		500.00
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Check: 22998

Payment Method: Check

Amount Tendered: 500.00

Change Returned: 0.00

Clerk: BILLSHAW

William A. Shaw, Prothonotary/Clerk of Cou

By: _____
Deputy Clerk

2004-722-CD

CLEARFIELD COUNTY INVESTIGATORS
RUSSELL G. TRIPONEY

Issued on May 15, 2009

Expires on May 15, 2014



This certifies that RUSSELL G. TRIPONEY

is a LICENSED PRIVATE DETECTIVE in
CLEARFIELD COUNTY, STATE OF PENNSYLVANIA

S.S. No. *** ** 0331

A handwritten signature in black ink, likely belonging to the Prothonotary.

Prothonotary

D. O. B. 5-11-38 Height 5'6"

Weight 200 LB Eyes BLUE

Hair BLACK Comp. FAIR

PHONE

814-765-8566



Right Thumb Print

A handwritten signature in black ink, likely belonging to Russell G. Triponey.

Signature



THE OHIO CASUALTY INSURANCE COMPANY
136 North Third Street, Hamilton, Ohio 45025

CONTINUATION CERTIFICATE

BY WILLIAM J. SHAW
05/26/09
Prothonotary/Clerk of Court

IN CONSIDERATION of the payment of a premium of \$ \$400.00

THE OHIO CASUALTY INSURANCE COMPANY hereby continues in force to 05/26/14
its bond No. 3824897, effective 05/26/04, on behalf of
CLEARFIELD COUNTY INVESTIGATORS, principal, in favor of
CLEARFIELD COUNTY COURTHOUSE, obligee,
subject to all its terms, conditions and limitations as set forth and expressed in said bond.

This certificate is executed upon the express condition that the Company's liability under said bond and this and all continuation certificates issued in connection therewith shall not be cumulative, and shall not in any event exceed the amount set forth in said bond, or said amount as it may have been increased or decreased by any rider(s) or endorsement(s) properly issued by the Company.

Dated this 26TH day of MAY 2009

THE OHIO CASUALTY INSURANCE COMPANY

By

Kimberly A. Kuge

ATTORNEY-IN-FACT

CERTIFIED COPY OF POWER OF ATTORNEY
THE OHIO CASUALTY INSURANCE COMPANY
• , WEST AMERICAN INSURANCE COMPANY

No. 37-994

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, an Ohio Corporation, and WEST AMERICAN INSURANCE COMPANY, an Indiana Corporation, pursuant to the authority granted by Article III, Section 9 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby nominate, constitute and appoint: **Kerry A. Enders, Beth A. Seibert, Kimberly A. Klinger, Judy Shields, Christine Arthur or Steve Salazar of Harrisburg, Pennsylvania** its true and lawful agent (s) and attorney (s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES excluding, however, any bond(s) or undertaking(s) guaranteeing the payment of notes and interest thereon

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Companies at their administrative offices in Fairfield, Ohio, in their own proper persons.

The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(s)-in-fact.

In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company and West American Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of each Company this **7th day of December, 2004**.



Sam Lawrence

Sam Lawrence, Assistant Secretary

STATE OF OHIO,
COUNTY OF BUTLER

On this **7th day of December, 2004** before the subscriber, a Notary Public of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came Sam Lawrence, Assistant Secretary of THE OHIO CASUALTY INSURANCE COMPANY and WEST AMERICAN INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn deposes and says that he is the officer of the Companies aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and the said Corporate Seals and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Hamilton, State of Ohio, the day and year first above written.



Cheryl S. Gregory

Notary Public in and for County of Butler, State of Ohio
My Commission expires **August 6, 2007**.

This power of attorney is granted under and by authority of Article III, Section 9 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company and West American Insurance Company, extracts from which read:

Article III, Section 9. Appointment of Attorneys-in-Fact. The Chairman of the Board, the President, any Vice-President, the Secretary or any Assistant Secretary of the corporation shall be and is hereby vested with full power and authority to appoint attorneys-in-fact for the purpose of signing the name of the corporation as surety to, and to execute, attach the seal of the corporation to, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation, partnership, limited liability company or other entity, or the official representative thereof, or to any county or state, or any official board or boards of any county or state, or the United States of America or any agency thereof, or to any other political subdivision thereof

This instrument is signed and sealed as authorized by the following resolution adopted by the Boards of Directors of the Companies on October 21, 2004:

RESOLVED, That the signature of any officer of the Company authorized under Article III, Section 9 of its Code of Regulations and By-laws and the Company seal may be affixed by facsimile to any power of attorney or copy thereof issued on behalf of the Company to make, execute, seal and deliver for and on its behalf as surety any and all bonds, undertakings or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment. Such signatures and seal are hereby adopted by the Company as original signatures and seal and shall, with respect to any bond, undertaking or other written obligations in the nature thereof to which it is attached, be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby certify that the foregoing power of attorney, the referenced By-Laws of the Companies and the above resolution of their Boards of Directors 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 seals of the Companies this **26th day of May, 2009**



Mark L. Schmidt

Assistant Secretary

Partnership, Association or Corporation Private Detective License Renewal Form

No. 82-1504-CD

Name of Partnership,
Association or Corporation CLEARFIELD COUNTY INVESTIGATORS

County Of CLEARFIELD

Federal Identification No. 25-1442431

Address of Principal Place of Business:

624 Arrowhead Way

Clearfield, PA 16830

NOV 15 2009
0132002

William J. Shaw
County Clerk of Courts

Branch office(s) address(es): *(Attach separate sheet for additional offices.)*

N/A

On a separate sheet state the Name, Address, Date of Birth and Social Security Number of each individual composing the partnership, association or corporation.

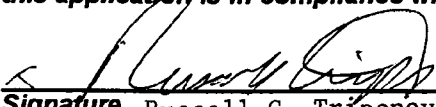
Has any member of the partnership, association or corporation ever been arrested or convicted of a criminal offense in this state or any other state? ☒ no, ☐ yes *(If yes, give details on separate sheet.)*

Date current license issued: 05 / 24 / 04
month day year

Date of expiration 05 / 26 / 09
month day year

The undersigned hereby affirm that the foregoing information is true and correct to the best of said persons' knowledge, information and belief; said affirmation being made subject to penalties prescribed by 18 Pa. C.S.A. Sec. 4904, unsworn falsifications to authorities. By signing this affirmation the undersigned further certifies that they are familiar with the Private Detective Act of August 21, 1953, P.L. 1273, Sec. 1, as amended, and warrant that this application is in compliance with the provisions of the Act.

(Attach separate sheet for additional signatures.)


Signature Russell G. Triponey

Date

Signature

Date

Signature

Date

Signature

Date

For use by County

Criminal records check:

☒ County

☒ State

☐ NCIC

☐ Check if conviction found

☒ Fee Paid 500.00

☒ License renewal **Approved**

Date License Renewed 5-15-09

New License expiration date 5-26-14

☐ License renewal **Not Approved**

Date submitted to Court for hearing

Signature



Clerk of Courts

Name, Address, Date of Birth and Social Security Number of individual
composing business of CLEARFIELD COUNTY INVESTIGATORS:

Russell G. Triponey
624 Arrowhead Way
Clearfield, PA 16830

Date of Birth: May 11, 1938

Social Security Number: 188-30-0331

Partnership, Association or Corporation Private Detective License Renewal Form

Name of Partnership,
Association or Corporation Clearfield County Investigators County Of Clearfield

Federal Identification No. 25-1442431

04-722-CJ

Address of Principal Place of Business:

624 Arrowhead Way

Clearfield, PA 16830

Branch office(s) address(es): *(Attach separate sheet for additional offices.)*

N/A

FILED pd
03:30 PM
MAY 21 2004

William A. Shaw
Prothonotary/Clerk of Courts

On a separate sheet state the Name, Address, Date of Birth and Social Security Number of each individual composing the partnership, association or corporation.

Has any member of the partnership, association or corporation ever been arrested or convicted of a criminal offense in this state or any other state? ☒ no, ☐ yes *(If yes, give details on separate sheet.)*

Date current license issued: 5 / 26 / 99 Date of expiration 5 / 26 / 04
month day year month day year

The undersigned hereby affirm that the foregoing information is true and correct to the best of said persons' knowledge, information and belief; said affirmation being made subject to penalties prescribed by 18 Pa. C.S.A. Sec. 4904, unsworn falsifications to authorities. By signing this affirmation the undersigned further certifies that they are familiar with the Private Detective Act of August 21, 1953, P.L. 1273, Sec. 1, as amended, and warrant that this application is in compliance with the provisions of the Act.
(Attach separate sheet for additional signatures.)

Signature

Date

Signature

Date

Signature

Date

Signature

Date

For use by County

Criminal records check:

☒ County

☐ State

☒ NCIC

☐ Check if conviction found

☒ License renewal **Approved**

Date License Renewed 5/24/04

New License expiration date 5/26/09

☐ License renewal **Not Approved**

Date submitted to Court for hearing _____

Signature

Clerk of Courts

☒ Fee Paid \$500.00

Name, Address, Date of Birth and Social Security Number of individual
composing business of CLEARFIELD COUNTY INVESTIGATORS:

Russell G. Triponey
624 Arrowhead Way
Clearfield, PA 16830

Date of Birth: May 11, 1938

Social Security Number: 188-30-0331



The Ohio Casualty Insurance Company

136 North Third Street, Hamilton, Ohio 45025

Bond # 3824897

BOND

KNOW ALL MEN BY THESE PRESENTS: That we
Clearfield County Investigators,

624 Arrowhead Way, Clearfield PA 16830

(Full Name [top line] and Address [bottom line] of Principal)

(hereinafter called the Principal) as Principal, and The Ohio Casualty Insurance Company, with principal offices at Hamilton, Ohio
(hereinafter called the Surety) as Surety, are held and firmly bound unto

The Commonwealth of Pennsylvania

County of Clearfield, Clearfield PA 16830

(Full Name [top line] and Address [bottom line] of Obligor)

(hereinafter called the Obligor), in the penal sum of

Ten Thousand and No/100

(Dollars) \$ 10,000

for the payment of which well and truly to made, we do hereby bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has made or is about to make application to the Obligor for a License to

Private Detective

for a term beginning on May 26th, 2004 and ending on* May 26th, 2009

(*strike out if license or permit is for an indefinite term)

NOW, THEREFORE, if the Principal shall indemnify the Obligor against any loss directly arising by reason of failure of said Principal to comply with the laws or ordinances under which said license or permit is granted, or any lawful rules or regulations pertaining thereto, then this obligation shall be void; otherwise to remain in full force and effect.

PROVIDED, HOWEVER, AND UPON THE FOLLOWING EXPRESS CONDITIONS:

1. This bond shall be and remain in full force during the term of said license or permit unless canceled in accordance with paragraph 2 below; but if said license or permit was issued for a specific term, and is renewed for one or more specific terms, this bond will be extended to cover such additional term(s) upon the execution by the Surety of a Continuation Certificate, provided such certificate is acceptable to the Obligor. In no event, however, shall the liability of the Surety be cumulative from year to year or from period to period, nor exceed the penal sum written in this first paragraph of this bond.
2. The Surety shall have the right to terminate its liability by notifying the Obligor in writing ten (10) days in advance of its intention to do so.

SIGNED, SEALED AND DATED

May 20th, 2004

By: 

Principal

The Ohio Casualty Insurance Company

By: 

Kevin D. McMillen

Attorney-in-Fact



The member companies of **Ohio Casualty Group**
9450 Seward Road, Fairfield, Ohio 45014 www.ocas.com

BOND NUMBER: 3824897

DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

After the September 11, 2001 collapse of the World Trade Center, some insurance and reinsurance companies excluded coverage for terrorist events from their policies. The economy was affected, to the extent that \$15 billion dollars of new construction was cancelled or delayed. As an economic aid, the Federal Government has enacted the Terrorism Risk Insurance Act of 2002. As part of the act, we are required to notify you that subject to the terms and conditions as stated in your applicable bond forms, coverage for losses sustained by acts of terrorism is already included in your current bond. Effective November 26, 2002, under your existing bond, losses caused by certified acts of terrorism as defined in the Terrorism Risk Insurance Act of 2002 would be partially reimbursed by the Federal Government under a formula established by federal law. Under this formula, the Federal Government pay 90% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage.

Under the current bond, that portion of your premium that is attributable to coverage for acts of terrorism is \$0.

We strongly urge you to contact your independent insurance agent if you have any questions regarding this matter.

CERTIFIED COPY OF POWER OF ATTORNEY
THE OHIO CASUALTY INSURANCE COMPANY
WEST AMERICAN INSURANCE COMPANY

No. 36-911

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, an Ohio Corporation, and WEST AMERICAN INSURANCE COMPANY, an Indiana Corporation, in pursuance of authority granted by Article VI, Section 7 of the By-Laws of The Ohio Casualty Insurance Company and Article VI, Section 1 of West American Insurance Company, do hereby nominate, constitute and appoint **Kevin D. McMillen or Randall L. Lemmo of Smethport, Pennsylvania** its true and lawful agent (s) and attorney (s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES, not exceeding in any single instance **TEN MILLION (\$10,000,000.00) DOLLARS**, excluding, however, any bond(s) or undertaking(s) guaranteeing the payment of notes and interest thereon

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Companies at their administrative offices in Hamilton, Ohio, in their own proper persons. The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(s)-in-fact.

In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company and West American Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of each Company this **29th day of April, 2003**.



Sam Lawrence

Sam Lawrence, Assistant Secretary

STATE OF OHIO,
COUNTY OF BUTLER

On this **29th day of April, 2003** before the subscriber, a Notary Public of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came Sam Lawrence, Assistant Secretary of THE OHIO CASUALTY INSURANCE COMPANY and WEST AMERICAN INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn depose and saith, that he is the officer of the Companies aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and the said Corporate Seals and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Hamilton, State of Ohio, the day and year first above written.



Cheryl S. Gregory

Notary Public in and for County of Butler, State of Ohio
My Commission expires **August 6, 2007**.

This power of attorney is granted under and by authority of Article VI, Section 7 of the By-Laws of The Ohio Casualty Insurance Company and Article VI, Section I of West American Insurance Company, extracts from which read:

Article VI, Section 7. APPOINTMENT OF ATTORNEYS-IN-FACT, ETC. "The chairman of the board, the president, any vice-president, the secretary or any assistant secretary of each of these Companies shall be and is hereby vested with full power and authority to appoint attorneys-in-fact for the purpose of signing the name of the Companies as surety to, and to execute, attach the corporate seal, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation, or the official representative thereof, or to any county or state, or any official board or boards of county or state, or the United States of America, or to any other political subdivision."

Article VI, Section 1. APPOINTMENT OF RESIDENT OFFICERS. "The Chairman of the Board, the President, any Vice President, a Secretary or any Assistant Secretary shall be and is hereby vested with full power and authority to appoint attorneys in fact for the purpose of signing the name of the corporation as surety or guarantor, and to execute, attach the corporate seal, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of surety-ship or guarantee, and policies of insurance to be given in favor of an individual, firm, corporation, or the official representative thereof, or to any county or state, or any official board or boards of any county or state, or the United States of America, or to any other political subdivision."

This instrument is signed and sealed by facsimile as authorized by the following Resolution adopted by the respective directors of the Companies (adopted May 27, 1970-The Ohio Casualty Insurance Company; adopted April 24, 1980-West American Insurance Company):

"RESOLVED that the signature of any officer of the Company authorized by the By-Laws to appoint attorneys in fact, the signature of the Secretary or any Assistant Secretary certifying to the correctness of any copy of a power of attorney and the seal of the Company may be affixed by facsimile to any power of attorney or copy thereof issued on behalf of the Company. Such signatures and seal are hereby adopted by the Company as original signatures and seal, to be valid and binding upon the Company with the same force and effect as though manually affixed."

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby certify that the foregoing power of attorney, the referenced By-Laws of the Companies and the above Resolution of their Boards of Directors 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 seals of the Companies this **20th day of May, 2004**.



Mark E. Schmidt

Assistant Secretary

RESPONSE FROM PENNSYLVANIA BUREAU OF MOTOR VEHICLES

OLN: 09780426. VALIDATED: 2004-03-05. EXPIRES: 2008-05-12.

NAM: TRIPONEY, RUSSELL G

624 ARROWHEAD WAY

CLEARFIELD

PA. 16830

D.A. OFFICE
COLLEEN

SSN: 188300331.

DOB: 1938-05-11. SEX: M.

EYE: BLU.

HGT: 5' 6".

RESTRICTIONS: NONE

SUSPENSION: NO

OPERATOR CLASS: C = SINGLE VEH <= 26,000

OPERATOR TYPE: REG LICENSE

VALID DUPLICATE LICENSE NUMBER: N/A

INFORMATION OBTAINED FROM PENNDOT FILES AND SHOULD BE VERIFIED

May-21-04 16:01 From-CLEARFIELD EMERGENCY SVCS 911 CENTER 8147689920 T-306 P.02/03 F-743
CFD177-20392 - CHR 05/21/04 15:44:07 - 05/21/04 15:44:07 BT85PATTDH5S

*** RESPONSE FROM PA COMPUTERIZED CRIMINAL HISTORY FILE ***

ORI/PA017013A.NAM/TRIPONEY, RUSSELL G DOB/19380511.RNG/ .
SOC/188300331.CTN/ .FBI/ .SID/ .
PUR/C.ATN/DA .OPR/.

*** RESPONSE FROM PA CCHRI - BASED ON IDENTIFIERS ABOVE ***

NO RECORD FOUND ON: SOC

NO RECORD FOUND ON: NAM

NLO10H85PATTDLWHO20

PA017013A

NO IDENTIFIABLE RECORD IN THE NCIC INTERSTATE IDENTIFICATION INDEX
(III) FOR NAM/TRIPONEY, RUSSELL G. SEX/M. RAC/W. DOB/19380511. PUR/C.
SOC/188300331.

NOTICE -- A LARGE NUMBER OF RECORDS FOR PERSONS BORN PRIOR TO 1956 ARE
NOT AUTOMATED AT THE FBI. IF A SEARCH OF THE NONAUTOMATED FILES IS
DESIRED, A FINGERPRINT CARD SHOULD BE SUBMITTED.

END

04-722-CD
CLEARFIELD COUNTY INVESTIGATORS
RUSSELL G. TRIPONEY



Issued on: 5/24/04

Expires on: 5/26/09

This certifies that RUSSELL G. TRIPONEY

is a LICENSED PRIVATE DETECTIVE in
CLEARFIELD COUNTY, STATE OF PENNSYLVANIA

S.S. No. 188-30-0331

A handwritten signature in cursive script, likely belonging to the Prothonotary.

Prothonotary

D. O. B. 5-11-38 Height 5'6"

Weight 200 lb Eyes Blue

Hair Black Comp. Fair

PHONE

814-765-8566



Right Thumb Print



A handwritten signature in cursive script, likely belonging to Russell G. Triponey.

Signature