

State of Connecticut
Office of the Probate Court Administrator
Professional Conservator Probate Bond

Bond No: _____

KNOW ALL PERSONS BY THESE PRESENTS, That we,

_____ as Principal,
and NGM Insurance Company, a company duly authorized to do business in the State of Connecticut, as Surety, are held and firmly bound unto the State of Connecticut, Office of the Probate Court Administrator and its successors and assigns, in the full and just sum of \$50,000.00 lawful money of the United States of America, for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

WHEREAS, the above bounden Principal has entered into a contract with the Office of the Probate Court Administrator under which the Principal agrees to accept appointments from Probate Courts to serve as conservator for indigent individuals; and

WHEREAS, the contract requires the Principal to give bond on the terms and conditions set forth in the contract.

NOW THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the said Principal, as Conservator, shall faithfully perform all the duties required by law in connection with the Principal's conservatorship appointments under the provisions of the contract, then this obligation is to be void, otherwise to remain in full force and effect.

THIS BOND IS SUBJECT TO THE FOLLOWING PROVISIONS:

1. This bond shall be continuous until cancelled by the Surety by the giving of thirty (30) days notice to the Office of the Probate Court Administrator. At the expiration of said thirty (30) days, the Surety shall be relieved from any liability for acts or omissions committed by the Principal subsequent to the date of cancellation. Provided, however, the liability of the Surety hereunder shall remain in effect for a period of six (6) months beyond the date of cancellation for acts or omissions committed by the Principal while this bond was in force.
2. The Surety's liability shall not exceed the amount stated above regardless of the number of individuals for whom the Principal serves as Conservator, the number of Courts in which the Principal is appointed, the number of years this bond remains in force or the number or amount of premiums paid.

Signed and sealed this 29th day of June, 2016

Principal

Surety: NGM Insurance Company

KNOW ALL MEN BY THESE PRESENTS: That NGM Insurance Company, a Florida corporation having its principal office in the City of Jacksonville, State of Florida, pursuant to Article IV, Section 2 of the By-Laws of said Company, to wit:

"SECTION 2. The board of directors, the president, any vice president, secretary, or the treasurer shall have the power and authority to appoint attorneys-in-fact and to authorize them to execute on behalf of the company and affix the seal of the company thereto, bonds, recognizances, contracts of indemnity or writings obligatory in the nature of a bond, recognizance or conditional undertaking and to remove any such attorneys-in-fact at any time and revoke the power and authority given to them."

does hereby make, constitute and appoint John C. Kronholm, Attorney-in-Fact its true and lawful Attorney-in-fact, to make, execute, seal and deliver for and on its behalf, and as its act and deed bond number S-847983 dated July 1, 2016 on behalf of **** Law Office of Tracey C. Hammer LLC ****

in favor of State of Connecticut, Office of Probate Court Administrator for Fifty Thousand and 00/100

Dollars (\$ 50,000.00)

and to bind NGM Insurance Company thereby as fully and to the same extent as if such instrument was signed by the duly authorized officers of NGM Insurance Company; this act of said Attorney is hereby ratified and confirmed.

This power of attorney is signed and sealed by facsimile under and by the authority of the following resolution adopted by the Directors of NGM Insurance Company at a meeting duly called and held on the 2nd day of December 1977:

Voted: That the signature of any officer authorized by the By-Laws and the company seal may be affixed by facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance or other written obligation in the nature thereof; such signature and seal when so used being hereby adopted by the company as the original signature of such officer and the original seal of the company to be valid and binding upon the company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, NGM Insurance Company has caused these presents to be signed by its Vice President, General Counsel and Secretary and its corporate seal to be hereto affixed this 11th day of January, 2016.

NGM INSURANCE COMPANY

Bruce R. Fox

Vice President, General Counsel and Secretary



State of Florida,
County of Duval

On this 11th day of January, 2016 before the undersigned a Notary Public of State of Florida in and for the County of Duval duly commissioned and qualified, came Bruce R. Fox of NGM Insurance Company, to me personally known to be the officer described herein, and who executed the preceding instrument and he acknowledged the execution of same, and being by me fully sworn, deposed and said that he is an officer of said Company, aforesaid; that the seal affixed to the preceding instrument is the corporate seal of said Company, and the said corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Company; that Article IV, Section 2 of the By-Laws of said Company is now in force.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed by official seal at Jacksonville, Florida this 11th day of January, 2016.



Tasha Ann Philpot
NOTARY PUBLIC
STATE OF FLORIDA
Comm# FF915117
Expires 10/3/2019

I, Nancy Giordano-Ramos, Vice President of NGM Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by said Company which is still in force and effect. IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Company at Jacksonville, Florida this 29th day of June, 2016.



WARNING: Any unauthorized reproduction or alteration of this document is prohibited.

TO CONFIRM VALIDITY of the attached bond please call **1-603-358-1343**.

TO SUBMIT A CLAIM: Send all correspondence to 55 West Street, Keene, NH 03431 Attn: Bond Claim Dept. or call our Bond Claim Dept. at 1-603-358-1229.