BIDDER'S SECURITY

(Attach to this page)



MERCHANTS BONDING COMPANY (MUTUAL) • MERCHANTS NATIONAL BONDING. INC. 2100 FLEUR DRIVE • DES MOINES, IOWA 50321-1158 • (800) 678-8171 • (515) 243-3854 FAX

BID BOND PUBLIC WORK

| | | Bond No. | N/A |
|--|--|--|--|
| KNOW ALL PERSONS BY THESE PRESENTS: | | | |
| That Figas Construction | | | The Control of Control of the Contro |
| (hereinafter called the Principal) as Principal, and | the Merch | nants Bonding Company (Mutual) | a corporation of |
| the State of Iowa, with its Home Office in the City of | of Des Moines, | lowa, (hereinafter called Surety), | as Surety, are held |
| and firmly bound to Humboldt Bay Harbor Recreation | a & Conservation | Dist. | |
| (hereinafter called the Obligee) in the full and just s | sum of (Ten P | ercent (10%) of the bid amount |) |
| | | | Dollars |
| good and lawful money of the United States of A made, the Principal and Surety bind themselves, t and severally, firmly by these presents. | | | |
| Signed and dated this 22nd | day of | January | 2019 |
| THE CONDITION OF THIS OBLIGATION IS | SUCH, that, if t | he Obligee shall make any award | d to the Principal for |
| Humboldt Bay Piling Removal Project Samoa, CA | | | |
| | | | |
| according to the terms of the proposal or bid made enter into a contract with the Obligee in accordar bond for the faithful performance thereof with the other Surety or Sureties approved by the Obligee; the damages which the Obligee may suffer by rea obligation shall be null and void; otherwise it shall | nce with the ter Merchant or if the Princip ason of such fail | ms of said proposal or bid and avasts Bonding Company (Mutual) al shall, in case of failure to do so ure, not exceeding the penalty of | ward, and shall give _and Surety, or with o, pay to the Obligee |
| IN TESTIMONY WHEREOF, the Principal and | d Surety have o | caused these presents to be duly | signed and sealed. |
| Witness: | Figas Constr | - Principal | |
| | ву Оф | am higas | , |
| Attest: | By tuls | Merchants Bonding Company (M | lutuaf) |

CON 0333 (2/12)



Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of Iowa (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

Bruce G Okrepkie; Cheryl Griggs; James G Gray; Jeff Okrepkie; Kimberlynne Dodds; Robb Daer

their true and lawful Attorney(s)-in-Fact, to sign its name as surety(ies) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the following By-Laws adopted by the Board of Directors of Merchants Bonding Company (Mutual) on April 23, 2011 and amended August 14, 2015 and adopted by the Board of Directors of Merchants National Bonding, Inc., on October 16, 2015.

"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and aut hority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner-Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 6th day of

, 2017

1933 2003

MERCHANTS BONDING COMPANY (MUTUAL) MERCHANTS NATIONAL BONDING, INC.

April

STATE OF IOWA COUNTY OF DALLAS ss.

On this this 6th day of April 2017 , before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC.; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies; and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.



ALICIA K. GRAM Commission Number 767430 My Commission Expires April 1, 2020

Notary Public

(Expiration of notary's commission does not invalidate this instrument)

I, William Warner, Jr., Secretary of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by said Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 22nd day of

January

. 2019

William Harner Jr.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

| or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature True Notary Public California by Signature of Notary Public Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Number of Pages: Signar(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) | | |
|--|--|---|
| County of Humboldt On January 22, 2019 | A notary public or other officer completing this certific document to which this certificate is attached, and not | cate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document. |
| Date | , |) |
| Date Here Insert Name and Title of the Officer personally appeared James G. Gray Name(s) of Signer(s) who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(e) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. Lectify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. WITNESS my hand and official seal. Signature Signature of Notary Public Signature Option Signature of Notary Public Signature Option Signature Option Signature Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer - Title(s): Partner Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Other: Other: Other: Capacity(ies) Claimed Conservator Other: Other: Other: Other: Ogeneral Individual Attorney in Fact Trustee Guardian or Conservator Other: Other: Other: Other: Other Other: Other: Other Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Other: Ot | On January 22, 2019 before me, Mindy | / Kathleen Sehon, Notary Public |
| who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature | | |
| who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature Wathlean Schon Signature of Notary Public Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: | personally appeared <u>James G. Gray</u> | , |
| subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their-signature(e) on the instrument the person(s) or the entity upon behalf of which the person(e) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature of Notary Public Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: Number of Pages: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Order Sex Description of the document or fraudulent reattachment of this form to an unintended document. Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: | | Name(s) of Signer(s) |
| of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. WITNESS my hand and official seal. Signature of Notary Public Section Signature of Notary Public Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: | subscribed to the within instrument and acknow his/her/their authorized capacity(ies), and that by I | wledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s). |
| MINDY KATHLEEN SEHON COMM. #2245036 NOTARY Public - CALIFORNIA MUMBOLDT COUNTY My Comm. Expires June 24, 2022 Place Notary Seal Above Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Number of Pages: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Individual Attorney in Fact Other: Other: Signature Mathle of Notary Public Signature | | of the State of California that the foregoing paragraph |
| Place Notary Seal Above Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: Number of Pages: | | WITNESS my hand and official seal. |
| Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: Number of Pages: Signer(s) Other Than Named Above: Signer(s) Claimed by Signer(s) Signer's Name: Signer's Name: Corporate Officer — Title(s): Partner — Limited | COMM. #2245036 NOTARY PUBLIC - CALIFORNIA HUMBOLDT COUNTY | Signature Mindy Kathleen Schon |
| Description of Attached Document Document Date: Number of Pages: Signer(s) Other Than Named Above: Signer's Name: Corporate Officer — Title(s): Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Guardian or Conservator Other: Other: Guardian or Conservator Other: Ocument Date: Document Date: Documen | OF | |
| Title or Type of Document: Number of Pages: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Individual Guardian or Conservator Other: Document Date: Corporate Officer Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Other: | | |
| Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: | Title or Type of Document: | |
| | Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing: | Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing: |

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

| A notary public or other officer completing this certificate document to which this certificate is attached, and not the | verifies only the identity of the individual who signed the truthfulness, accuracy, or validity of that document. |
|---|---|
| State of California) County of Humboldt) | |
| On January 23, 2019 before me, Mindy Ka | athleen Sehon, Notary Public |
| Date | Here Insert Name and Title of the Officer |
| personally appeared Adam Figas | , |
| | Name(s) of Signer(s) |
| who proved to me on the basis of satisfactory exsubscribed to the within instrument and acknowled his/her/their authorized capacity(ies), and that by his/or the entity upon behalf of which the person(s) acte | dged to me that he/she/they executed the same in her/their signature(s) on the instrument the person(s). |
| of | ertify under PENALTY OF PERJURY under the laws the State of California that the foregoing paragraph true and correct. |
| W | ITNESS my hand and official seal. |
| MINDY KATHLEEN SEHON COMM. #2245036 NOTARY PUBLIC • CALIFORNIA HUMBOLDT COUNTY My Comm. Expires June 24, 2022 | gnature Mundy Kouhleen Schon Signature of Notary Public |
| Place Notary Seal Above | |
| Though this section is optional, completing this in fraudulent reattachment of this fo | formation can deter alteration of the document or |
| Description of Attached Document | |
| Title or Type of Document: | Document Date: |
| Number of Pages: Signer(s) Other Than I | Named Above: |
| Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Guardian or Conservator Other: Signer Is Representing: | Signer's Name: |

DESIGNATION OF SUBCONTRACTORS

The Contractor must list all subcontractors doing work in excess of 0.50% of total bid amount. The undersigned certifies that he has used the sub-bids of the following listed subcontractors in making up his bid and that the subcontractors listed will be used for the work for which they bid, subject to the approval of the District, and in accordance with applicable provisions of these Specifications and Plans.

| Bid Item No. | Subcontractor | Address & Tel. No. | State License No. |
|------------------|---|--|-------------------|
| _ <i>N/H</i> | | | |
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| | | | |
| 1/23/19 | | Adrina F | igas |
| Date | *************************************** | Bidder's Name | 900 |
| 115 Redr | iond Rd | adam | Figus |
| Address | | Authorized Signatu | re |
| Eureka | CA 95503 | Individue | |
| | | Type of Organizatio (Individual, Partnershi | |
| | -7670 | 33277 | 3 1/31/2021 |
| Telephone Number | | State Contractor's I | ic No & Eva Data |

MATERIAL RECYCLING INFORMATION FORM

Humboldt Bay Piling Removal Project

(Note: Recycling information requested and listed on this page is being collected for internal audit use only. It will not be used in any way related to the award of the project.)

| Bid Item No. | Description of item to be recycled | Estimated tonnage of item to be recycled | Name & address of recycling facility |
|-----------------|------------------------------------|--|--------------------------------------|
| | NA | | |
| | | | |
| | | | |
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| | | | |
| | | | |

| 1/23/19 | Adam Figas |
|------------------|--|
| Date | Bidder's Name |
| 115 Reamond Rd | adgin Light |
| Address | Authorized Signature |
| Eureka CA 95503 | Individual |
| | Type of Organization |
| | (Individual, Partnership or Corporation) |
| 707 - 442-2620 | 332773 1/31/202 |
| Telephone Number | State Contractor's Lic. No. & Exp. Date |

NONCOLLUSION DECLARATION TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID

Humboldt Bay Piling Removal Project

| The undersigned declares: | |
|--|--|
| party making the foregoing bid. The bid is not maperson, partnership, company, association, organizary or sham. The bidder has not directly or indirectly in sham bid. The bidder has not directly or indirectly or anyone else to put in a sham bid, or to refrain from indirectly, sought by agreement, communication, bidder or any other bidder, or to fix any overhead, other bidder. All statements contained in the bid submitted his or her bid price or any breakdown the data relative thereto, to any corporation, partnership to any member or agent thereof, to effectuate a component of the partnership, joint venture, limited liable. | , the ade in the interest of, or on behalf of, any undisclose ation, or corporation. The bid is genuine and not collusive induced or solicited any other bidder to put in a false of colluded, conspired, connived, or agreed with any bidder or bidding. The bidder has not in any manner, directly or conference with anyone to fix the bid price of the profit, or cost element of the bid price, or of that of ar id are true. The bidder has not, directly or indirectly ereof, or the contents thereof, or divulged information of ip, company, association, organization, bid depository, collusive or sham bid, and has not paid, and will not pa executing this declaration on behalf of a bidder that is bility company, limited liability partnership, or any other owner to execute, and does execute, this declaration of |
| I declare under penalty of perjury under the laws of true and correct and that this declaration is execute | |
| at Humboldt (DISTRICT), | California (STATE). |
| Adam Figas Bidder's Name | Authorized Signature Trigas |
| 115 Redmond Rol | Individual |
| Address 1 | Type of Organization (Individual, Partnership or Corporation) |
| Fraka CH 95503 | 332773 1/31/2021 |
| Address 2 | State Contractor's Lic No & Exp. Date |

PROPOSAL TO THE BOARD OF COMMISSIONERS
OF THE HUMBOLDT BAY HARBOR, RECREATION & CONSERVATION DISTRICT

FOR

Humboldt Bay Piling Removal Project

To the Board of Commissioners of the Humboldt Bay Harbor, Recreation and Conservation District:

The undersigned, as Bidder, declares that the only persons or parties interested in this proposal as principals are those named herein; that this proposal is made without collusion with any other person, firm, or corporation; that he has carefully examined the location(s) of the proposed work and the proposed form of the contract and the plans and specifications; and he agrees if this proposal is accepted, that he will contract with the Humboldt Bay Harbor, Recreation and Conservation District, in the form of the contract annexed hereto, to provide all necessary machinery, tools, apparatus, and other means of construction and to do all the work and furnish all the materials specified in the contract in the manner and time prescribed and according to the requirements of the Engineer; that he will provide the bonds as required herein at the time he executes the contract; that he will provide proof of insurance as provided herein; that he will begin the work on the project within TEN (10) CALENDAR DAYS after receiving notice from the District to proceed and diligently prosecute the same to completion before the expiration of March 30, 2019 (unless extension is granted) from the date of commencement of the work; and that as provided for in the General Provisions, the liquidated damage shall be in the sum of Two Hundred Fifty (\$250.00) per day for each and every calendar day delay in finishing the work beyond the time described herein; and that he will take in full payment therefore the following unit or lump sum prices, as the case may be, to wit:

SEE BID SCHEDULE ON FOLLOWING PAGE



| Bid Schedule Humboldt Bay Harbor, Recreation, and Conservation District Humboldt Bay Piling Removal Project | | | | |
|---|-------------------------------------|---|----------------|----------------------|
| Bid Item No. | Approx. Quantity | Bid Item Description with Total Price Written in Words | Unit Price | Total Item Price |
| 1 BASE | Lump Sum | Mobilization and Demobilization fixed at <u>twenty</u> <u>Five thousand</u> Dollars. | N/A | \$ 25,000,00 |
| 2 BASE | Lump Sum based on 21 piles | Vibratory extraction and disposal/recycling of derelict pilings Sixty three thousand | N/A | \$ <u>63,000</u> ,00 |
| - | | E | BASE BID TOTAL | \$ 88,000.00 |

| TOTAL BASE BID AMOUNT IN NUMBERS: \$ 88,000. | 00 | |
|---|---------------|---------------------------------------|
| TOTAL BASE BID AMOUNT IN WORDS: | | • |
| eighty eight thousand | | |
| ADDITIONAL REQUIRED BID ITEMS: | | |
| Stand-by time at \$ 1500 , ∞ per hour. | | |
| adam Frances | Figors Constr | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| Signature of Bidder | Company | acron. |

BIDDER MUST SIGN THIS PAGE

It is further understood and agreed that:

- In case of a discrepancy between words and figures, the words shall prevail, and in case of a A. discrepancy between unit prices and totals, the unit price shall prevail.
- The District reserves the right to eliminate any section of this proposal from the contract without В. claim of the Contractor for profits lost.
- No verbal agreement or conversation with any officer, agent, or employee of the District, either C. before or after the execution of the Agreement, shall affect or modify any of the terms or obligations of this proposal.
- D. The District will not be responsible for any errors or omissions on the part of the undersigned in making up his bid, nor will the bidder be released on account of errors.
- E. The undersigned bidder is properly licensed in accordance with the State of California Contractors' State License Law providing for the registration of Contractors.
- F. If the proposal is accepted and the undersigned shall fail to contract as aforesaid and to give the two bonds in the sums to be determined as aforesaid, with surety satisfactory to the Board of Commissioners, within FOURTEEN (14) CALENDAR DAYS (not including Sundays) after the bidder has received the Notice of Award, the District may, at its option, determine that the bidder has abandoned the contract, and thereafter this proposal and the acceptance thereof shall be null and void.
- G. The undersigned bidder certifies that he has confirmed that the proposed form of contract and the Plans and Specifications are complete.

Individua

Type of Organization

(Individual, Partnership or Corporation)

THE ABOVE SIGNED ACKNOWLEDGES THAT THESE REPRESENTATIONS ARE MADE UNDER PENALTY OF PERJURY.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

| \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
|--|---|
| A notary public or other officer completing this certific document to which this certificate is attached, and not | cate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document. |
| State of California County of Humboldt | |
| On January 23, 2019 before me, Mindy | / Kathleen Sehon, Notary Public |
| Date Date | Here Insert Name and Title of the Officer |
| personally appeared Adam Figas | , |
| | Name(s) of Signer(s) |
| subscribed to the within instrument and acknow | y evidence to be the person(s) whose name(s) is/are wledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s), acted, executed the instrument. |
| | I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. |
| MINDY KATHLEEN SEHON COMM. #2245036 MOTARY PUBLIC • CALIFORNIA HUMBOLDT COUNTY My Comm. Expires June 24, 2022 | Signature Mundy Kathleen Schom Signature of Notary Public |
| Place Notary Seal Above | |
| Though this section is optional, completing this | PTIONAL s information can deter alteration of the document or is form to an unintended document. |
| Description of Attached Document | |
| Title or Type of Document: Signer(s) Other That | Document Date: |
| | an Named Above: |
| Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing: | Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing: |