

# COVELER & KATZ, P.C.

*Attorneys At Law*  
TWO MEMORIAL CITY PLAZA  
820 GESSNER, SUITE 1710  
HOUSTON, TEXAS 77024-8261

Telephone (713) 984-8222  
Facsimile (713) 984-0670

December 9, 2013

The Honorable Bob Hebert  
Fort Bend County Judge  
Attn: Ann Werlein  
301 Jackson Street  
Richmond, Texas 77469

**Re: Fort Bend Emergency Services District No. 3 ("FBESD 3")**

Dear Ms. Werlein:

Enclosed for filing with your office please find the original Public Official Bond for Pamela Henry, Treasurer of FBESD 3.

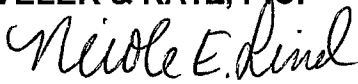
Should you have any questions, please do not hesitate to contact me.

Thank you.

Sincerely,

**COVELER & KATZ, P.C.**

By:



Nicole E. Lind

/nl

Enclosure

PUBLIC OFFICIAL BOND

Bond No. 44BSBGP5181

Know All Men By These Presents, That we, Pamela Henry  
of 820 Gessner, Suite 1710, Houston, TX 77024 in the State of Texas, as Principal,  
and the Hartford Casualty Insurance Company, a corporation duly organized and  
existing under and by virtue of the Laws of the State of Indiana, and authorized to become sole surety on bonds  
in the State of Texas, as Surety, are held and firmly bound unto  
Port Bend Emergency Services District No. 3 in the State of Texas  
in the full and just sum of One Hundred Thousand Dollars, lawful money of the  
United States, for 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 said Pamela Henry has been duly elected or  
appointed to the office of Treasurer in and for the Port Bend Emergency Services District No. 3 for  
the term beginning on October 4, 2013 and ending on December 31, 2014

Now, Therefore, The Condition of the Above Obligation is Such, that if the above bounden  
Pamela Henry shall during the aforesaid term, faithfully and truly perform all the  
duties of his/her office and shall pay over and account for all funds coming into his/her hands by virtue of his/her  
said office of Treasurer as required by law, then this obligation to be  
void, otherwise to be and remain in full force and virtue.

In Witness Whereof, the said Principal has hereunto set his/her hand and seal and the said Surety has  
caused these presents to be signed by its officers proper for the purpose the day and year first above written.

Signed, Sealed and Dated this 15th day of October, 2013.

Pamela Henry  
Principal

Hartford Casualty Insurance Company  
Surety

By: Patricia L. Bortner  
Patricia L. Bortner, Attorney in Fact

State of PA

County of York

Before me, this 15th day of October, A.D. 2013, personally appeared the  
said Patricia L. Bortner to me known and known to me to be the individual  
described in and who executed the foregoing bond, and he/she acknowledged to me that he/she executed the  
same.

Joanne E. Wolf

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL  
JO ANNE E. WOLF, NOTARY PUBLIC  
YORK TOWNSHIP, YORK COUNTY  
MY COMMISSION EXPIRES APRIL 30, 2015

# POWER OF ATTORNEY

Direct Inquiries/Claims to:

**THE HARTFORD**

Bond T-4

One Hartford Plaza

Hartford, Connecticut 06155

call: 888-266-3488 or fax: 860-757-5835)

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Agency Code: 44 410222

- |                                     |                                                                                                                  |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/>            | Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut         |
| <input checked="" type="checkbox"/> | Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana         |
| <input type="checkbox"/>            | Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut |
| <input type="checkbox"/>            | Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut |
| <input type="checkbox"/>            | Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana            |
| <input type="checkbox"/>            | Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois     |
| <input type="checkbox"/>            | Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana   |
| <input type="checkbox"/>            | Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida |

having their home office in Hartford, Connecticut (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, **up to the amount of UNLIMITED** :

CATHY BERGER, PATRICIA L. BORTNER, WILLIAM E. GREENAWALT, JR, SCOTT C. ROGERS, MARGARET M. SELWAY, JAMYE SHAH OF YORK, PENNSYLVANIA

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by ☒, 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.

In Witness Whereof, and as authorized by a Resolution of the Board of Directors of the Companies on August 1, 2009, the Companies have caused these presents to be signed by its Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



*Wesley W. Cowling*

Wesley W. Cowling, Assistant Secretary

*M. Ross Fisher*

M. Ross Fisher, Vice President

STATE OF CONNECTICUT

COUNTY OF HARTFORD

ss.

Hartford

On this 12th day of July, 2012, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.



CERTIFICATE

*Kathleen T. Maynard*

Kathleen T. Maynard  
Notary Public

My Commission Expires July 31, 2016

I, the undersigned, Vice President of the Companies, 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 effective as of October 15, 2013

Signed and sealed at the City of Hartford.



*Gary W. Stumper*

Gary W. Stumper, Vice President

## **IMPORTANT NOTICE**

To obtain information or make a complaint:

You may contact your agent.

You may call Hartford Insurance Group at the toll free telephone number for information or to make a complaint at:

**1-800-392-7805**

You may also write to The Hartford:

**The Hartford  
Hartford Financial Products  
2 Park Avenue, 5<sup>th</sup> Floor  
New York, New York 10016  
1-212-277-0400**

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at:

**1-800-252-3439**

You may write the Texas Department of Insurance

P.O. Box 149104  
Austin, TX 78714-9104  
Fax Number (512) 475-1771  
Web: <http://www.tdi.state.tx.us>  
E-mail: [ConsumerProtection@tdi.state.tx.us](mailto:ConsumerProtection@tdi.state.tx.us)

**PREMIUM OR CLAIMS DISPUTES:** Should you have a dispute concerning your premium or about a claim you should contact the agent first. If the dispute is not resolved, you may contact the Texas Department of Insurance.

**ATTACH THIS NOTICE TO YOUR POLICY:** This notice is for your information only and does not become a part or condition of the attached document.

## **AVISO IMPORTANTE**

Para obtener informacion o para someter una queja.

Puede comunicarse con su agente.

Usted puede llamar al numero de telefono gratis de The Hartford Insurance Group para informacion o para someter una queja al

**1-800-392-7805**

Usted tambien puede escribir a The Hartford.

**The Hartford  
Hartford Financial Products  
2 Park Avenue, 5<sup>th</sup> Floor  
New York, New York 10016  
1-212-277-0400**

Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca de compañías, coberturas, derechos o quejas al:

**1-800-252-3439**

Puede escribir al Departamento de Seguros de Texas

P.O. Box 149104  
Austin, TX 78714-9104  
Fax Number (512) 475-1771  
Web: <http://www.tdi.state.tx.us>  
E-mail: [ConsumerProtection@tdi.state.tx.us](mailto:ConsumerProtection@tdi.state.tx.us)

**DISPUTAS SOBRE PRIMAS O RECLAMOS:** Si tiene una disputa concerniente a su prima o a un reclamo, debe comunicarse con su agente primero. Si no se resuelve la disputa, puede entonces comunicarse con el departamento (TDI).

**UNA ESTE AVISO A SU POLIZA:** Este aviso es solo para proposito de informacion y no se convierte en parte o condicion del documento adjunto.



## **Claims Inquiries Notice**

Hartford Fire Insurance Company  
Hartford Casualty Insurance Company  
Hartford Accident and Indemnity Company  
Hartford Underwriters Insurance Company

Twin City Insurance Company  
Hartford Insurance Company of Illinois  
Hartford Insurance Company of the Midwest  
Hartford Insurance Company of the Southwest

Please address inquiries regarding **Claims** for all surety and fidelity products issued by The Hartford's underwriting companies to the following:

Phone Number: : 888-266-3488  
Fax – Claims : 860-757-5835 or 860-221-3965  
E-mail : [bond.claims@thehartford.com](mailto:bond.claims@thehartford.com)

Mailing Address : The Hartford  
BOND, T-4  
One Hartford Plaza  
Hartford, CT 06155

**Producer Compensation Notice**



You can review and obtain information on The Hartford's  
producer compensation practices at [www.thehartford.com](http://www.thehartford.com)  
or at 1-800-592-5717.