



Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950

## VERIFICATION CERTIFICATE

License No. N/A

Bond No.: 106563090

THIS IS TO CERTIFY that the above referenced Bond, issued by  
Travelers Casualty and Surety Company of America, dated  
August 13, 2025, in the amount of One Million  
( \$1,000,000.00 ) on behalf of  
Paula Ann Roach (as Principal),  
and in favor of Rutherford County Board of Commissioners (as Oblige),  
remains in effect, subject to all agreements, conditions and limitations.

Signed, sealed and dated July 25, 2025

Travelers Casualty and Surety Company of America

By: \_\_\_\_\_  
Attorney-in-Fact

This notice provides no coverage, nor does it change any policy terms. To determine the scope of coverage and the insured's rights and duties under the policy, read the entire policy carefully. For more information about the content of this notice, the insured should contact their agent or broker. If there is any conflict between the policy and this notice, the terms of the policy prevail.

## **Independent Agent And Broker Compensation Notice**

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For information on how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website: [www.travelers.com/w3c/legal/Producer\\_Compensation\\_Disclosure.html](http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html).

Or write:

**Travelers, Agency Compensation**  
**One Tower Square**  
**Hartford, CT 06183**



Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950

## VERIFICATION CERTIFICATE

License No. N/A

Bond No.: 105754730

THIS IS TO CERTIFY that the above referenced Bond, issued by

Travelers Casualty and Surety Company of America, dated  
March 02, 2025, in the amount of Four Hundred and Fifty Thousand  
( \$450,000.00 ) on behalf of

Paula Ann Roach (as Principal),  
and in favor of Rutherford County Tourism Development Authority (as Obligee),  
remains in effect, subject to all agreements, conditions and limitations.

Signed, sealed and dated February 3, 2025

Travelers Casualty and Surety Company of America

By: \_\_\_\_\_  
Attorney-in-Fact

This notice provides no coverage, nor does it change any policy terms. To determine the scope of coverage and the insured's rights and duties under the policy, read the entire policy carefully. For more information about the content of this notice, the insured should contact their agent or broker. If there is any conflict between the policy and this notice, the terms of the policy prevail.

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Or write or call:

**Travelers, Agency Compensation  
One Tower Square  
Hartford, Connecticut 06183**

**(866) 904.8348**



Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950

## VERIFICATION CERTIFICATE

License No. N/A

Bond No.: 106563111

THIS IS TO CERTIFY that the above referenced Bond, issued by  
Travelers Casualty and Surety Company of America, dated  
August 13, 2025, in the amount of Fifty Thousand  
( \$50,000.00 ) on behalf of  
Paula Ann Roach (as Principal),  
and in favor of Rutherford County Airport Authority (as Oblige),  
remains in effect, subject to all agreements, conditions and limitations.

Signed, sealed and dated July 25, 2025

Travelers Casualty and Surety Company of America

By: \_\_\_\_\_  
Attorney-in-Fact

This notice provides no coverage, nor does it change any policy terms. To determine the scope of coverage and the insured's rights and duties under the policy, read the entire policy carefully. For more information about the content of this notice, the insured should contact their agent or broker. If there is any conflict between the policy and this notice, the terms of the policy prevail.

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Or write:

**Travelers, Agency Compensation**  
**One Tower Square**  
**Hartford, CT 06183**



Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950  
(704) 544-3719  
(704)544-3760  
JHARRIMA@travelers.com

07/25/2025

DAVID TRAN  
MAIN STREET FIN GRP  
22 NORTH TRADE ST  
TYRON, NC 28782

This is a Direct Bill Policy. The Direct Bill  
Account Number is 1583T8204.

This is the Renewal for      Paula Ann Roach  
510 Holly Hills Dr  
FOREST CITY, NC 28043

Bond Number: 106563111  
Type of Bond: Public Official Bond  
Obligee Name: Rutherford County Airport Authority  
Obligee Address: 289 N. Main St.  
Obligee City, State & Zip: RUTHERFORDTON, NC, 28139, RUTHERFORD  
Transaction Effective Date: August 13, 2025  
Premium Effective Date: August 13, 2025  
Premium Expiry Date: August 13, 2026  
Bond Limit: \$50,000.00  
Bond Premium: \$158.00  
Commission - Percentage: 30.00%  
Special Commission: \$0  
Countersignature Branch:  
Countersignature Commission: \$0  
State Tax: \$0.00  
State Surcharge: \$0.00  
**TOTAL PREMIUM: \$158.00**

Producer Name: DAVID TRAN



Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950  
(704) 544-3719  
(704)544-3760  
JHARRIMA@travelers.com

07/25/2025

PATRICK PHILLIPS  
MAIN STREET FIN GRP  
22 NORTH TRADE ST  
TYRON, NC 28782

This is a Direct Bill Policy. The Direct Bill  
Account Number is 6427G7201.

This is the Renewal for      Paula Ann Roach  
510 Holly Hills Dr  
FOREST CITY, NC 28043

Bond Number: 106563116  
Type of Bond: Public Official Bond  
Obligee Name: Rutherford County Transit Authority  
Obligee Address: 289 N. Main St.  
Obligee City, State & Zip: RUTHERFORDTON, NC, 28139, RUTHERFORD  
Transaction Effective Date: August 13, 2025  
Premium Effective Date: August 13, 2025  
Premium Expiry Date: August 13, 2026  
Bond Limit: \$50,000.00  
Bond Premium: \$158.00  
Commission - Percentage: 30.00%  
Special Commission: \$0  
Countersignature Branch:  
Countersignature Commission: \$0  
State Tax: \$0.00  
State Surcharge: \$0.00  
**TOTAL PREMIUM: \$158.00**

Producer Name: PATRICK PHILLIPS





Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950

## VERIFICATION CERTIFICATE

License No. N/A

Bond No.: 106563116

THIS IS TO CERTIFY that the above referenced Bond, issued by  
Travelers Casualty and Surety Company of America, dated  
August 13, 2025, in the amount of Fifty Thousand  
( \$50,000.00 ) on behalf of  
Paula Ann Roach (as Principal),  
and in favor of Rutherford County Transit Authority (as Oblige),  
remains in effect, subject to all agreements, conditions and limitations.

Signed, sealed and dated July 25, 2025

Travelers Casualty and Surety Company of America

By: \_\_\_\_\_  
Attorney-in-Fact

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Or write:

**Travelers, Agency Compensation**  
**One Tower Square**  
**Hartford, CT 06183**



# Western Surety Company

## Schedule

Bond No.: 65638784

Principal Name: Rutherford County Board of Commissioners

Effective Date: October 31, 2022

This schedule is in replacement of and not in addition to any previous schedule issued for the bond referenced above. The liability of WESTERN SURETY COMPANY shall not be cumulative and shall not exceed the Penalty Amount for Each Position of the bond in effect as to any Employee or Officer when the dishonest act of the Employee or Officer shall have been committed.

Name	Position	No. of Officers or Employees in Each Position	Penalty Amount for Each Position	Annual Premium for Each Position*
Delores Hunt	Social Services Director		\$100,000.00	\$350.00
***** End of Schedule *****				

\*Premium charged will be prorated based on the effective date of the change and the term dates of the bond.

Dated this 17th day of October, 2022.

Accepted

By

Official Title



WESTERN SURETY COMPANY

By

*Paul T. Bruffat*

Paul T. Bruffat, Vice President



# Western Surety Company

## PUBLIC OFFICIAL NAME SCHEDULE BOND

Bond No. 65 638784

Name of Insured Rutherford County Board of Commissioners

WESTERN SURETY COMPANY, as Surety, in consideration of an agreed premium is held and firmly bound unto the Obligee, for the faithful discharge of the duties of any Officer or Employee who is named in the schedule attached, or added thereto, by written acceptance of the Surety, while in the service of the Insured, not exceeding the sum specified in said schedule or written acceptance of the Surety after the 1st day of October, 2021.

### THIS BOND IS SUBJECT TO THE FOLLOWING CONDITIONS AND LIMITATIONS:

1. Automatic coverage is granted for the first thirty days' service of any Officer or Employee succeeding one listed in the Schedule of Employees, in the same amount, but in no event for more than Twenty-Five Hundred and No/100 Dollars (\$2,500.00).

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty days' period the Insured has requested in writing that the Officer or Employee be added to the schedule, and the Surety by written acceptance has consented thereto.

2. Coverage on any Officer or Employee may be increased or decreased upon written request of the Insured, and agreed to in writing by the Surety.

3. The Surety's liability under this bond and all continuations thereof shall not be cumulative, and regardless of the number of years this bond is continued in force, and, regardless of the number of annual premiums that may be payable or paid, the Surety's aggregate liability on account of any and all acts committed by any one Officer or Employee during the effective period of this bond shall not exceed the largest single amount for which the Officer or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during the term of any one or more years, nor shall the liability exceed the amount in effect as to the Officer or Employee when the loss occurred.

Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Officer or Employee immediately upon the termination of such Officer's or Employee's services, or immediately on the date specified in written notice given by the Insured to the Surety as to any and all Officers or Employees or after thirty days' written notice given by the Surety to the Insured at the above stated address of its intent to cancel this bond in its entirety, or as to any Officer or Employee.

5. None of the specifications of this bond shall be altered or waived, except in writing by the Surety executed by the Chairman of the Board, its President, Vice President, Secretary, Assistant Secretary or Treasurer.

6. The liability of the Surety hereunder is subject to the terms and conditions of the following Riders attached hereto:

Dated this 11th day of October, 2021.

WESTERN SURETY COMPANY

By

Paul T. Brufat, Vice President

## SCHEDULE OF EMPLOYEES

Item Number	Name	Position	Location	Amount	Premium
	Kevin Marino	Social Services Director		\$100,000.00	

WESTERN SURETY COMPANY

By

STERN SURETY COMPANY  
*Paul T. Bruffat*  
Paul T. Bruffat, Vice President

Paul T. Bruflat, Vice President



Jodi C Harriman  
PO Box 2950  
Hartford, CT 06104-2950  
(704) 544-3719  
(704)544-3760  
JHARRIMA@travelers.com

07/30/2025

DAVID TRAN  
MAIN STREET FIN GRP  
22 NORTH TRADE ST  
TYRON, NC 28782

This is a Direct Bill Policy. The Direct Bill  
Account Number is 8317K9201.

This is the Renewal for      STEVEN WAYNE GARRISON  
334 FAIRFOREST DR  
RUTHERFORDTON, NC 28139-3229

Bond Number: 107132352  
Type of Bond: Public Official Bond  
Obligee Name: RUTHERFORD COUNTY  
Obligee Address: 289 N. MAIN ST.  
Obligee City, State & Zip: RUTHERFORDTON, NC, 28139, RUTHERFORD  
Transaction Effective Date: September 1, 2025  
Premium Effective Date: September 1, 2025  
Premium Expiry Date: September 1, 2026  
Bond Limit: \$100,000.00  
Bond Premium: \$315.00  
Commission - Percentage: 30.00%  
Special Commission: \$0  
Countersignature Branch:  
Countersignature Commission: \$0  
State Tax: \$0.00  
State Surcharge: \$0.00  
**TOTAL PREMIUM: \$315.00**

Producer Name: DAVID TRAN

This notice provides no coverage, nor does it change any policy terms. To determine the scope of coverage and the insured's rights and duties under the policy, read the entire policy carefully. For more information about the content of this notice, the insured should contact their agent or broker. If there is any conflict between the policy and this notice, the terms of the policy prevail.

## **Independent Agent And Broker Compensation Notice**

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Or write:

**Travelers, Agency Compensation**  
**One Tower Square**  
**Hartford, CT 06183**



Gerald P Burke  
PO Box 2905  
Hartford, CT 06104-2905

November 22, 2022

Phone: (610) 458-2232

Email: GPBURKE@travelers.com

Kevin Lamoy  
MAIN STREET INS GROUP (009403)  
22 N TRADE ST  
TRYON, NC 28782

This is a Direct Bill policy. The Direct Bill  
Account Number is 8171TA246.

This is the New Business for: **JAMES AARON ELLENBURG**  
**320 WIDD LAWING LN**  
**UNION MILLS, NC 28167-8588**

Bond Number: **107737949**  
Type of Bond: **Sheriff**  
Obligee Name: **County of Rutherford**  
Obligee Address: **289 N. Main Street**  
Obligee City, State & Zip: **RUTHERFORDTON, NC 28139 USA**  
Transaction Effective Date: **December 05, 2022**  
Premium Effective Date: **December 05, 2022**  
Premium Expiry Date: **December 05, 2026**  
Bond Limit: **\$10,000.00**  
Bond Premium: **\$325.00**  
Commission - Percentage: **30%**  
Special Commission: **\$0.00**  
Countersignature Branch:  
Countersignature Commission: **\$0.00**  
State Tax: **\$0.00**  
State Surcharge: **\$0.00**  
**TOTAL PREMIUM: \$325.00**

Comments:

Thank you for placing your business with us.

Producer Name: **DRIVER, KIMBERLY M**





Travelers Casualty and Surety Company of America  
Hartford, CT 06183

**PUBLIC OFFICIAL BOND -  
FOR DEFINITE TERM**

**BOND NO.** 107737949

KNOW ALL MEN BY THESE PRESENTS, That we JAMES AARON ELLENBURG  
of 320 WIDD LAWING LN, UNION MILLS, NC 28167-8588, as Principal, and  
Travelers Casualty and Surety Company of America, a corporation of CT, as Surety are held  
and firmly bound unto County of Rutherford in the  
penal sum of Ten Thousand ( \$10,000.00 ) Dollars, lawful money  
of the United States of America, for the payment of which well and truly to be made, said principal binds  
himself/herself, his/her heirs, executors, administrators and assigns, and said Surety binds itself, its  
successors and assigns, jointly and severally, firmly by these presents.

SEALED and dated this 22 day of November, 2022.

WHEREAS, the said principal has been ☒ elected or ☐ appointed to the office of:  
Sheriff for a definite term beginning December 05, 2022  
and ending December 05, 2026 and is required to furnish a bond for the faithful performance of  
the duties of the said office or position.

NOW, THEREFORE THE CONDITION OF THIS OBLIGATION is such that if the above bounden  
Principal shall (except as hereinafter provided) faithfully perform the duties of his/her said office or  
position during the said term, and shall pay over to the persons authorized by law to receive the same  
all moneys that may come into his/her hands during the said term without fraud or delay, and at the  
expiration of said term, or in case of his/her resignation or removal from office, shall turn over to  
his/her successor all records and property which have come into his/her hands, then this obligation to  
be null and void; otherwise to remain in full force and effect.

PROVIDED, HOWEVER, that the above named Surety shall not be liable hereunder for any loss of  
any public fund resulting from the insolvency of any bank or banks in which said funds are deposited;  
and, if this provision shall be held void, this entire bond shall be void.

AND PROVIDED FURTHER, that the Surety may cancel bond at any time during the said term by  
giving to the obligee a written notice of its desire so to cancel and at the expiration of thirty (30) days  
from the receipt of such notice by the obligee the surety shall be completely released as to all liability  
thereafter accruing. If this provision shall be held void, this entire bond shall be void.

WITNESS:

JAMES AARON ELLENBURG

\_\_\_\_\_  
(Seal)  
(Principal)



Travelers Casualty and Surety Company of America

By:

Russell E. Vance

Attorney-in-Fact



Travelers Casualty and Surety Company of America  
Travelers Casualty and Surety Company  
St. Paul Fire and Marine Insurance Company  
Farmington Casualty Company

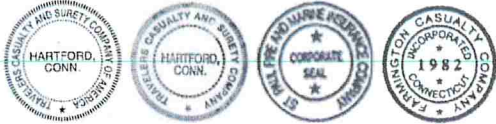
### POWER OF ATTORNEY

**KNOW ALL MEN BY THESE PRESENTS:** That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, St. Paul Fire and Marine Insurance Company, and Farmington Casualty Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint **Russell E. Vance**, of **Hartford, CT**, their true and lawful Attorney(s)-in-Fact, to sign, execute, seal and acknowledge the following bond:

**Surety Bond No.: 107737949**

**Principal: JAMES AARON ELLENBURG**

**IN WITNESS WHEREOF**, the Companies have caused this instrument to be signed and their corporate seals to be hereto affixed, this **21st** day of **April, 2021**.



State of Connecticut

City of Hartford ss.

By:

Robert L. Raney, Senior Vice President

On this the **21st** day of **April, 2021**, before me personally appeared **Robert L. Raney**, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

**IN WITNESS WHEREOF**, I hereunto set my hand and official seal.

My Commission expires the **30th** day of **June, 2026**



Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, which resolutions are now in full force and effect, reading as follows:

**RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

**FURTHER RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

**FURTHER RESOLVED**, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

**FURTHER RESOLVED**, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, **Kevin E. Hughes**, the undersigned, Assistant Secretary of each 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 remains in full force and effect.

Dated this 22 day of November, 2022.



Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.  
Please refer to the above-named Attorney(s)-in-Fact and the details of the bond to which this Power of Attorney is attached.





## **IMPORTANT NOTICE REGARDING COMPENSATION DISCLOSURE**

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website: [www.travelers.com/w3c/legal/Producer\\_Compensation\\_Disclosure.html](http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html)

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.



Copy

# Western Surety Company

## CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 71852068

briefly described as REGISTER OF DEEDS COUNTY OF RUTHERFORD

for RACHEL THOMAS

, as Principal,

in the sum of \$ Fifty Thousand and 00/100 Dollars, for the term beginning

December 5, 2021, and ending December 5, 2025, subject to all

the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 5th day of November, 2021.

WESTERN SURETY COMPANY

By

Paul T. Brugat, Vice President



THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.



# Western Surety Company

## POWER OF ATTORNEY

### KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

Paul T. Bruflat of Sioux Falls,  
State of South Dakota, its regularly elected Vice President,  
as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowledge and deliver for and on its behalf as Surety and as its act and deed, the following bond:


One REGISTER OF DEEDS COUNTY OF RUTHERFORD  
bond with bond number 71852068  
for RACHEL THOMAS  
as Principal in the penalty amount not to exceed: \$50,000.00.

Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws of Western Surety Company duly adopted and now in force, to-wit:

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be executed by its  
Vice President with the corporate seal affixed this 5th day of November,  
2021.

ATTEST



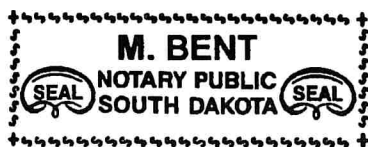
P. Leitheiser, Assistant Secretary

WESTERN SURETY COMPANY  
By   
Paul T. Bruflat, Vice President



STATE OF SOUTH DAKOTA }  
COUNTY OF MINNEHAHA } ss

On this 5th day of November, 2021, before me, a Notary Public, personally appeared  
Paul T. Bruflat and P. Leitheiser  
who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President  
and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said instrument to be the  
voluntary act and deed of said Corporation.



My Commission Expires March 2, 2026



Notary Public





Notice of Premium Due 01/14/2025

Billing Questions (888) 866-2666  
Email [info@cnasurety.com](mailto:info@cnasurety.com)

Premium \$595.00

RUTHERFORD COUNTY BOARD OF COMM COUNTY AUDITO  
155 GREENBRIAR DR  
FOREST CITY, NC 28043

*Richard Lawson*

Amount Due \$595.00

Bond Detail		
Bond #	65355405	Obligee OBLIGEE ADDRESS UNKNOWN
Company	Western Surety Company	
Term Dates	01/14/2025 to 01/14/2027	
Bond Amount	\$100,000.00	
Description	NC P E Name Schedule (1)	

Agent Information	Messages
Main Street Insurance Group 22 N. Trade Street Tryon, NC 28782 Phone : (877)872-4578	We show one individual in this business. To ensure proper coverage, verify the total number of employees (and owners, if they are covered) & fax, call or write us if the number has changed.

Payment Instructions



- Pay Online at [ONLINEPAY.CNASURETY.COM](https://ONLINEPAY.CNASURETY.COM)
- If paying by mail, please send payment 2 weeks prior to due date to ensure receipt  
Make check payable to CNA Surety  
Detach payment stub and return with payment

Note-Renewal documents will only be sent upon receipt of full payment

Rutherford County Board of Comm County Auditors Office

Bond # 65355405  
Company 0601  
Agency 32-00230  
Main Street Insurance Group

Payment Due	01/14/2025	Amount Due	\$595.00
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CNA Surety Direct Bill  
P.O. Box 957312  
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