PAYMENT BOND (See instructions on reverse)

DATE BOND EXECUTED (Must be same or later than date of contract)

August 15, 2012

OMB No.:9000-0045

Rpr Dining/Reserve Forces Facility, Bldg 2901

Public reporting burden for this collection of information is estimate to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and meintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat (MVR), Federal Acquisition Policy Division, GSA, Washington, DC 20405 PRINCIPAL (Legal name and business address) TYPE OF ORGANIZATION ("X" one) E.W. Wells Group, LLC INDIVIDUAL PARTNERSHIP 1221 S. Lamar Dallas, TX 75215 JOINT VENTURE X CORPORATION STATE OF INCORPORATION SURETY(IES) (Name(s) and business address(es) PENAL SUM OF BOND MILLION(S) THOUSAND(S) HUNDRED(S) CENTS Allegheny Casualty Company 794 1000 bo One Newark Center, 20th Floor Newark, NJ 07102 CONTRACT DATE CONTRACT NO. W91243-12-C-0004 8/10/2012

OBLIGATION:

We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit of liability is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The above obligation is void if the Principal promptly makes payment to all persons having a direct relationship with the Principal or a subcontractor of the Principal for furnishing labor, material or both in the prosecution of the work provided for in the contract identified above, and any authorized modifications of the contract that subsequently are made. Notice of those modifications to the Surety(ies) are waived.

WITNESS:

The Principal and Surety(ies) executed this payment bond and affixed their seals on the above date.

E.W. Wells G	roup, LLC PRINCIPAL				
SIGNATURE(S)	1. Ware Alle (Seal)	(Seal)	3.	(Seal)	Corporate
NAME(S) & TITLE(S) (Typed)	MANAGING MEMBER	· · · · · · · · · · · · · · · · · · ·	3.	(400)	Seal
	INDIVIDUAL SURE	TY(IES)	·		
SIGNATURE(S)	1. (Seal)	2.	***************************************		(Carl)
NAME(S) (Typed)	1.	2.			(Seal)
	CORPORATE SURE	TY(IES)			
NAME & ADDRESS	Allegheny Casualty Company One Newark Center, 20th Floor, Newark, NJ 07102	STATE OF II			
SIGNATURE(S) &	" MOON Bold"	2.			Corporate Seal
NAME(S) & TITLE(S) (Typed)	William D. Baldwin Attorney-in-Fact	2.			
ALITHOPIZED FOR	LOCAL PERPODUCTION	·			

Previous edition is usable

		CORPORATE SURETY(IE	S) (Continued)			
20	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.			
SU	NAME(S) & TITLE(S) (Typed)	1.	2.			
ပ	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
S	NAME(S) & TITLE(S) (Typed)	1.	2.			
٥	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
S	NAME(S) & TITLE(S) (Typed)	1.	2.			
ш	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
ns	NAME(S) & TITLE(S) (Typed)	1.	2.			
ш	NAME & ADDRESS		STATE OF INC.	\$		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
ns	NAME(S) & TiTLE(S) (Typed)	1.	2.		20	
Ö	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
S	NAMEIS) & TITLE(S) (Typed)	1.	2.		2	

INSTRUCTIONS

- 1. This form, for the protection of persons supplying labor and material, is used when a payment bond is required under the Act of August 24, 1935, 49 Stat. 793 (40 U.S.C. 270a-270e). Any deviation from this form will require the written approval of the Administrator of General Services.
- 2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-In-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
- 3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitation listed therein. Where more than one corporate surety is involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)." In the space

- designated "SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.
- (b) Where individual sureties are involved, a completed Affidavit of Individual Surety (Standard Form 28) for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning their financial capability.
- 4. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the word "Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
- Type the name and title of each person signing this bond in the space provided.

POWER OF ATTORN

INTERNATIONAL FIDELITY INSURANCE COMPANY **ALLEGHENY CASUALTY COMPANY**

ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of Pennsylvania, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

WILLIAM D. BALDWIN, BLAINE ALLEN, BRENT BALDWIN, BRADY K. COX, MICHAEL B. HILL, **BROCK BALDWIN**

Dallas, TX.

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the sald INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all Intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 15th day of August, 2000:

"RESOLVED, that (1) the President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 12th day of March, 2012.





STATE OF NEW JERSEY County of Essex

ROBERT W. MINSTER Executive Vice President/Chief Operating Officer (International Fidelity Insurance Company) and President (Allegheny Casualty Company)

Robert hint

On this 12th day of March 2012, before me came the Individual who executed the preceding Instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY; that the seals affixed to said Instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.

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



A NOTARY PUBLIC OF NEW JERSEY My Commission Expires Mar. 27, 2014

Cathy Vargue

CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of sald companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand this 15th day of August, 2012

MARIA BRANCO, Assistant Secretary

Maria H. Granco

FOIA Requested Record #J-14-0041 Released by the National Guard Bureau 37 INS 133 446

Page 3 of 6

IMPORTANT NOTICE

To obtain information or make a complaint:

You may call International Fidelity Insurance Company's toll-free telephone number for information or to make a complaint at:

1-800-333-4167

You may also write to International Fidelity Insurance Company at:

Attn: Claims Department One Newark Center, 20th Floor Newark, NJ 07102

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: (512) 475-1771

Web: http://www.tdi.state.tx.us

E-mail: ConsumerProtection@tdi.state.tx.us

PREMIUM OR CLAIM DISPUTES:

Should you have a dispute concerning your premium or about a claim you should contact the (agent) (company) (agent or the company) first. If the dispute is not resolved, you may contact the Texas Department of Insurance.

ATTACH THIS NOTICE TO YOUR BOND:

This notice is for information only and does not become a part or condition of the attached document.

AVISO IMPORTANTE

Para obtener informacion o para someter una queja:

Usted puede llamar al numero de telefono gratis de International Fidelity Insurance Company's para informacion o para someter una queja al:

1-800-333-4167

Usted tambien puede escribir a International Fidelity Insurance Company:

Attn: Claims Department One Newark Center, 20th Floor Newark, NJ 07102

Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca de companias, 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: (512) 475-1771

Web: http://www.tdi.state.tx.us

E-mail: 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 el (agente) (la compania) (agente o la compania) primero. Si no se resuelve la disputa, puede entonces comunicarse con el departamento (TDI).

UNA ESTE AVISO A SU FIANZA DE GARANTIA: Este aviso es solo para proposito de información y no se convierte en parte o condición del documento adjunto.

PERFORMANCE BOND (See instructions on reverse)

DATE BOND EXECUTED (Must be same or later than date of contract)

August 15, 2012

OMB No.: 9000-0045

Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or eny other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretarist (MVR), Federal Acquisition Policy Division, GSA, Washington, DC 20405

DC 20405	
PRINCIPAL (Legal name and business address)	TYPE OF ORGANIZATION ("X" one)
E.W. Wells Group, LLC 1221 S. Lamar	INDIVIDUAL PARTNERSHIP
Dallas, TX 75215	JOINT VENTURE X CORPORATION
	STATE OF INCORPORATION
	TX
SURETY(IES) (Name(s) and business address(es)	PENAL SUM OF BOND
	MILLION(S) THOUSAND(S) HUNDRED(S) CENTS
Allegheny Casualty Company	1 794 000 00
One Newark Center, 20th Floor	CONTRACT DATE CONTRACT NO.
Newark, NJ 07102	W91243-12-C-0004
	8/10/2012 Rpr Dining/Reserve Forces Facility, Bidg 290

OBLIGATION:

We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit of liability is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The Principal has entered into the contract identified above.

THEREFORE:

The above obligation is void if the Principal -

(a)(1) Performs and fulfills all the undertakings, covenants, terms, conditions, and agreements of the contract during the original term of the contract and any extensions thereof that are granted by the Government, with or without notice to the Surety(ies), and during the life of any guaranty required under the contract, and (2) performs and fulfills all the undertakings, covenants, terms conditions, and agreements of any and all duly authorized modifications of the contract that hereafter are made. Notice of those modifications to the Surety(ies) are waived.

(b) Pays to the Government the full amount of the taxes imposed by the Government, if the said contract is subject to the Miller Act, (40 U.S.C. 270a-270e), which are collected, deducted, or withheld from wages paid by the Principal In carrying out the construction contract with respect to which this bond is furnished.

WITNESS:

The Principal and Surety(ies) executed this performance bond and affixed their seals on the above date.

E.	W. Wells G	oup, LKC / PRINCIPA	L .						
SIG	NATURE(S)	1. Marc Illa (Soul) 2.	(Seal) (Seal)	Corporate					
NAME(S) & TITLE(S) (Typed)		MARK Williams 2. Managing mombor							
	INDIVIDUAL SURETY(IES)								
SIGNATURE(S)		1, (Seal)	2.	(Seal)					
	ME(S) ped)	1.	2.						
		CORPORATE SUR							
4	NAME & ADDRESS	Allegheny Casualty Company One Newark Center, 20th Floot, Newark, NJ 07102	PA \$1,851,000						
~		" genle Rose "	2.	Corporate Seal					
S	NAME(S) & TITLE(S) (Typed)	t. William D. Baldwin Attorney-in-Fact	2.]					

			COI	RPORATE SURET	Y(IES) (Continued)				
NAME & ADDRESS					STA	ATE OF INC.	LIABILITY LIMIT			
SIGNATURE(S	1.				2				Corporate Seal	
NAME(S) & TITLE(S) (Typed)	1.				2.	2.				
NAME & ADDRESS			····		STA	ATE OF INC.	LIABILITY LIMIT			
SIGNATURE(S	1.	· · · · · · · · · · · · · · · · · · ·			2.				Corporate Seal	
NAME(S) & TITLE(S) (Typed)	1.				2.					
NAME & ADDRESS					STA	ATE OF INC.	LIABILITY LIMIT		Corporate Seal	
SIGNATURE(S	1				2.					
NAME(S) & TITLE(S) (Typed)	1.				2.					
NAME & ADDRESS		383	• ,		STA	ATE OF INC.	LIABILITY LIMIT			
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NAME(S) & TITLE(S) (Typed)	1.				2.	2.				
NAME & ADDRESS					STA	TE OF INC.	LIABILITY LIMIT			
SIGNATURE(S	1.				2.	2			Corporate Seal	
NAME(S) & TITLE(S) (Typed)	1.				2.					
NAME & ADDRESS					STA	TE OF INC.	LIABILITY LIMIT			
SIGNATUREIS	1.		···		2.				Corporate Seal	
NAME(S) & TITLE(S) (Typed)	1.			······································	2.					
		BOND		TE PER THOUSAND (\$)	TOTAL (\$)				
		PREMIUM	\$	20		\$35,880.0	00			

INSTRUCTIONS

- 1. This form is authorized for use in connection with Government contracts. Any deviation from this form will require the written approval of the Administrator of General Services.
- 2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
- 3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitation listed therein. Where more than one corporate surety is Involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE"
- SURETY(IES)." In the space designated "SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.
- (b) Where individual sureties are involved, a completed Affidavit of Individual Surety (Standard Form 28) for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning their financial capability.
- 4. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the word "Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
- 5. Type the name and title of each person signing this bond in the space provided.