



May 10, 2011

VIA OVERNIGHT DELIVERY

Ms. Sharla Dillon
Dockets and Records Office
Tennessee Regulatory Authority
460 James Robertson Parkway
Nashville, Tennessee 37243

Re: Docket No. 11-00069
Evercom Systems, Inc. – Bond Rider for Name Change

Dear Ms. Dillon:

Please find enclosed an original and four copies of materials regarding a name change for Evercom Systems, Inc. ("Evercom"). Pursuant to Staff request, the Company has updated its Surety Bond to reflect the new name of Securus Technologies, Inc. The rider reflecting this change is provided for the Authority's records.

Evercom sincerely appreciates your attention to this matter. Please date stamp the enclosed additional copy of this correspondence and return it in the enclosed pre-addressed stamped envelope. Should you have questions regarding this filing, please contact the undersigned at (972) 277-0395 or ecurry@securustech.net.

Respectfully submitted,

A handwritten signature in cursive script that reads 'Erin L. Curry'.

Erin L. Curry
Senior Regulatory Analyst



Capitol INDEMNITY CORPORATION



Platte River INSURANCE COMPANY

115 Glastonbury Boulevard, Glastonbury, CT 06033- Phone 888-244-3980 or Fax 888-244-3981

Change Rider

Bond No. 41064252		On Behalf of Evercom Systems, Inc.
Date of Bond August 20, 2007		In favor of Tennessee Regulatory Authority
Additional Premium	Return Premium	Effective Date of Change May 9, 2011

This rider is to be attached to and form a part of the above described bond.

In consideration of the additional or return premium shown above the Surety hereby gives it consent to

Amend Principal Name:

From: Evercom Systems, Inc.

To: Securus Technologies, Inc.

Provided, however, that the aggregate liability of the Surety for any one or more losses occurring prior to the effective date of change shall not exceed \$ 20,000.00 , or for any one or more losses occurring after said date not exceed \$ 20,000.00 .
(Old Bond Amount)
(New Bond Amount)

It is further understood that in no event shall the Surety's liability be cumulative.

Signed and dated on May 9, 2011 .
(month, date, year)

Platte River Insurance Company

By: P.T. Osburn
P.T. Osburn, Attorney-in-Fact

**PLATTE RIVER INSURANCE COMPANY
POWER OF ATTORNEY**

41211608

KNOW ALL MEN BY THESE PRESENTS, That the **PLATTE RIVER INSURANCE COMPANY**, a corporation of the State of Nebraska, having its principal offices in the City of Middleton, Wisconsin, does make, constitute and appoint

-----MARY A. GARCIA, STEPHANIE L. GUNDERSON, HEATHER K. NOLES, MARC W. BOOTS, RICHARD COVINGTON-----
-----JOY DURHAM, P.T. OSBURN, MARIA D. ZUNIGA, VICKIE LACY, JOSEPH R. AULBERT-----

its true and lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf, as surety, and as its act and deed, any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of

----- ALL WRITTEN INSTRUMENTS IN AN AMOUNT NOT TO EXCEED: \$2,500,000 -----

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of **PLATTE RIVER INSURANCE COMPANY** at a meeting duly called and held on the 8th day of January, 2002.

"RESOLVED, that the President, and Vice-President, the Secretary or Treasurer, acting individually or otherwise, be and they hereby are granted the power and authorization to appoint by a Power of Attorney for the purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, one or more vice-presidents, assistant secretaries and attorney(s)-in-fact, each appointee to have the powers and duties usual to such offices to the business of the Corporation; the signature of such officers and the seal of the Corporation may be affixed to such power of attorney or to any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Corporation in the future with respect to any bond or undertaking or other writing obligatory in the nature thereof to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any of said officers, at any time."

IN WITNESS WHEREOF, the **PLATTE RIVER INSURANCE COMPANY** has caused these presents to be signed by its officer undersigned and its corporate seal to be hereto affixed duly attested, this 1st day of January, 2007.

Attest:

PLATTE RIVER INSURANCE COMPANY

David F. Pauly

David F. Pauly
Chairman & CEO



James J. McIntyre

James J. McIntyre
President

STATE OF WISCONSIN } S.S.:
COUNTY OF DANE

On the 1st day of January, 2007 before me personally came James J. McIntyre, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Dane, State of Wisconsin; that he is President of **PLATTE RIVER INSURANCE COMPANY**, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation and that he signed his name thereto by like order.



CERTIFICATE

Daniel W. Krueger

Daniel W. Krueger
Notary Public, Dane Co., WI
My Commission Is Permanent

STATE OF WISCONSIN } S.S.:
COUNTY OF DANE

I, the undersigned, duly elected to the office stated below, now the incumbent in **PLATTE RIVER INSURANCE COMPANY**, a Nebraska Corporation, authorized to make this certificate, **DO HEREBY CERTIFY** that the foregoing attached Power of Attorney remains in full force and has not been revoked; and furthermore, that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at the City of Middleton, State of Wisconsin this 9th day of May, 2011.



Alan S. Ogilvie

Alan S. Ogilvie
Secretary

THIS DOCUMENT IS NOT VALID UNLESS PRINTED ON GREEN SHADED BACKGROUND WITH A RED SERIAL NUMBER IN THE UPPER RIGHT HAND CORNER. IF YOU HAVE ANY QUESTIONS CONCERNING THE AUTHENTICITY OF THIS DOCUMENT CALL 800-475-4450.

PR-POA (8-07)