

THIS FORM HAS ESEN APPROVED BY THE INCIANA STATU BAR ASSOCIATION FOR USE BY LAWYERS CHLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN SLANK SPACES, STRIKING OUT PROVISIONS AND INSERTION OF SPECIAL CLAUMER, CONSTITUTES

The Fractice of Law and emould be done by a lawyer.

## POWER OF ATTORNEY

miches la Deske 5'6 - 6 - Surang mi - met brokke

589474

OF

(GRANTOR

MICHAEL W. BACK

(ATTORNEY-MAGACT)

The undersigned hereby nominates, constitutes and appoints MICHAEL W. BACK

whose address is 5696 BROADWAY, MERRILLVILLE, INDIANA 46410 as my true and lawful attorney-in-fact to do and perform for me and in my name the following:

## (Strike any paragraph not applicable)

(1) Banking and Financial Transactions — (a) To open accounts, in my name or on my behalf, in any bank or trust company, savings and loan company, insurance company, credit union, or any other banking or savings institution, and to deposit into such accounts, or into accounts now existing or hereafter established in my name, any money, checks, notes, drafts, acceptances or other evidences of indebtedness payable to or belonging to me, including but not being limited to checks or drafts issued by the Treasurer of the United States or any other official, bureau, department or agency of the United States Government or by the Treasurer or similar official of any state, or any other official, bureau, department or agency of any State, municipality or other government body; and to disburse, withdraw or receive from such accounts, all or any part of the balance therein; (b) to make such endorsements and to sign such, documents as may be required in connection with deposit into any of such accounts; (c) to sign checks, withdrawals, drafts, receipts or other documents as may be required in connection with disbursement or withdrawal from or receipt of such accounts; and (d) to have access to and to remove any or all of my property contained or held in any safety deposit box.

(Inchinenticio de recipio de la compansión de la compansi

which the matter and the control of the control of

(3) Tax Matters — (a) To prepare, execute and file on my behalf income and other tax returns and pay any amount determined due; (b) to prepare, execute and file on my behalf documents pertaining to real estate and personal property taxes, assessments, and applications for exemptions; and (c) to act on my behalf in tax matters where it may be necessary to negotiate, compromise and settle tax disputes, including appealing determinations of value assessments and taxes due.

(4) Conduct of Business — (a) To manage my property and to conduct my business affairs, including, but not limited to, leasing, managing and maintaining any real or personal property which I may own; (b) to recover, obtain and hold possession of any real estate, monies, goods, chattels, debts, or any other thing in which I may have an interest; and (c) to pay, discharge or compromise any of my debts or other obligations.

(5) Securities Transactions — (a) To purchase or otherwise acquire, to sell or otherwise dispose of, securities including, but not limited to, stocks, bonds, notes, and other securities or evidences of indebtedness, all at such price and on such terms as my attorney-in-fact may determine; (b) to vote any such securities in my name, in person or by proxy; and (c) to receive dividends and other distributions on such securities.

(6) Other powers specifically designated:

To trade, sell, or in any manner transfer by warranty deed any interest that grantors have or may have in real estate located in the state of Indiana.

19-6-5

FILED

JUL 1 - 1980

Office Office COUNTY

ALLIAM BIELSKI DE MILLIAM BECORDER

IN FURTHERANCE OF THESE POWERS I give my attorney-in-fact power and authority to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of this instrument, as fully as I could do personally for myself, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument.

Any act or thing lawfully done by my attorney-in-fact under this instrument shall be binding on me and on my heirs, assigns and legal representatives.

Persons to whom this instrument may be delivered may rely on its being in effect and unrevoked unless I shall have executed a proper instrument of revocation and recorded it, or caused it to be recorded, in the Miscellaneous Records of \_ County, State of Indiana, or unless I shall have died or have been judicially declared incompetent. If not aloresaid, the powers given my attorney-in-fact shall automatically terminate on revoked as \_, and this instrument shall become null and void. Signed this 9th day of Tolores 19 80 \_\_\_ before the person named below. as witness, who has duly witnessed my signing of this instrument in counterparts, each of which shall be considered an onginal. Counterpart No. \_\_\_ STATE OF INDIANA SS: COUNTY OF Before me, the undersigned, a Notary Public in and for said County and State, this \_ \_\_\_\_\_, 19\_\_\_\_\_, personally appeared the Grantor named above, and acknowledged the execution of the abow instrument to be his/her voluntary act and deed, for the uses and purposes therein stated. IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above written. My Commission Expires: The extorney-in-fact represents and warrants that within his knowledge this power is unrevoked and is still in full force and effect upon each and every exercise of the powers herein granted.

his instrument preparedity