

741202

*Frieda M. Bodor*  
4927 Oak Ave  
Hammond

**DURABLE POWER OF ATTORNEY**

I, FRIEDA M. BODOR, of Lake County, State of Indiana, do hereby make and appoint my daughter, CAROLYNN M. BODOR, as my true and lawful attorney in fact, (a specimen of whose signature appear below) for me and in my name to draw and endorse checks; to make and execute any and all contracts; to sell and assign notes, bonds and other securities; to receive and to demand all sums of money, debts, accounts, bequests, interest, dividends, annuities and demands whatsoever, as are now or shall hereafter become due, payable or belonging to me; to compromise the same; to execute instruments to effect the transfer of title to any motor vehicle owned by me; to sell, mortgage, convey and lease any interest in real estate, or personal property, wherever located, of which I may be the owner now or hereafter; to execute all instruments necessary in furtherance thereof; to execute and file all tax returns and to pay such taxes; I grant to my said attorney free access to any safe deposit box I may have in any financial institution and to sign any instruments, necessary to gain admission thereto; to arrange for and pay my medical, hospital expenses, including admission to hospitals and consent to or to reject medical treatment for me and to make application for insurance and other benefits related to such health care and treatment, and generally to transact any and all business for me of any kind whatsoever necessary or proper to be done in all matters effecting my business or property, and with the same force and effect as though I were acting for myself; and I hereby ratify and confirm all that my said attorney in fact shall do by virtue hereof. This Power of Attorney shall survive and remain in full force and effect in the event of my incompetence, unless sooner revoked by an instrument in writing and recorded in the Recorder's Office of Lake County, Indiana.

Reproduction of this executed original shall be deemed to be original counter parts of this Power of Attorney.

Specimen signature of Attorney-in-Fact

#36-124-31

*Carolynn M. Bodor*  
Carolynn M. Bodor

IN WITNESS WHEREOF, I have hereunto set my hand this 30 day of December, 1983, and I hereby certify to the correctness of the above specimen signature of my attorney.

*Frieda M. Bodor*  
Frieda M. Bodor

**FILED**

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
JAN 13 11 28 AM '84  
WILLIAM B. LESKI JR  
RECORDER

STATE OF INDIANA )  
                          ) SS: JAN 12 1983  
COUNTY OF LAKE )

Before me a Notary Public, in and for said County and State personally appeared the above named Frieda M. Bodor, who acknowledged the execution of the above and foregoing Power of Attorney.

Witness my hand and seal this 30 day of December, 1983.

My Commission Expires:

*Byron E. Bamber*  
Byron E. Bamber, Notary Public  
Residing in Lake County, Indiana

This instrument prepared by: Byron E. Bamber, 6944 Indianapolis Blvd., Hammond, IN 46324

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