

3806 W. 106TH LANE  
Crown Pt. In 46307

2 825105

GENERAL-DURABLE  
POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That <sup>V</sup>SIGMUND T. MENTZEL, do hereby make, constitute, and appoint my wife, MARGARET B. MENTZEL, my true and lawful attorney for me and in my name, place and stead, and for my use and benefit:

POWERS

1. To ask, demand, sue for, recover, collect and receive all sums of money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities, and demands whatsoever, as are now or shall hereafter become due, owing, payable or belonging to me, and have, sue and take all lawful ways or means in my name, or otherwise, for the recovery thereof, by legal process, suit, or foreclosure, and to compromise and agree for the same, and grant acquittance or other sufficient discharges for the same for me and in my name;

2. To endorse, negotiate, assign and transfer checks, negotiable instruments and all records associated with checking and savings accounts, and documents of every character;

3. To bargain, contract for, agree for, purchase, sell, convey, transfer, acquire and release real and personal property of every character, and to sign and execute deeds, notes, mortgages, deeds of trust, contracts and instruments of every character which lease, let, demise, bargain, sell, assign, release, convey, mortgage, secure and hypothecate real and personal property owned jointly, separately, of any character and description, upon such terms and conditions and under such covenants, restrictions and reservations as shall be deemed fit, just and proper by my said attorney;

4. To buy, sell, mortgage, hypothecate, and in any and every way and manner, to deal in and with goods, wares and personal property, choses in action, and real property in possession or to which I may be entitled;

5. To make, do and transact all and every kind of business;

6. To admit me to any hospital for emergency or long term care, employ physicians, and to contract for the payment and delivery of all medical and surgical services;

7. To exercise any right, option, or privilege available to me under or in connection with any life insurance policy, including, but not limited to, the right to surrender the policy, make a policy loan, and change the beneficiary;

8. And, also, for me and in my name, and as my act and deed, to sign, seal, endorse, execute, deliver, transfer, convey, negotiate, and acknowledge such deeds covenants, indentures, agreements, mortgages, leases, deeds of trust, negotiable and non-negotiable instruments, bills, bonds, notes, receipts, evidences of debt, and such other instruments in writing of whatever kind and nature, as may be necessary or proper in the premises.

OCT 21 9 24 AM '85  
RUDOLPH CLAY  
RECORDER

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

150/55

GIVING AND GRANTING unto my said attorney, full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully to all intents and purposes as I might or could do if personally present, hereby ratifying and confirming all that my said attorney shall lawfully do cause to be done by virtue of these presents.

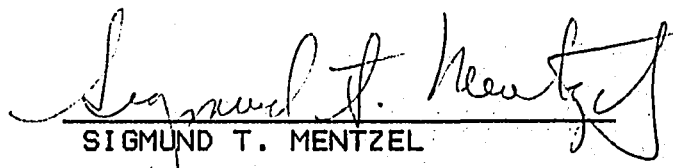
DISABILITY

This Power of Attorney shall remain effective during any disability, senility, or general mental incompetency which I may experience. The authority of my attorney-in-fact or agent shall be exercisable pursuant to ARS 14-5501 notwithstanding my disability, senility, or general mental incompetency, and all acts done by my attorney-in-fact or agent during any period of disability or incompetency have the same effect and inure to the benefit of and bind myself and my heirs, devisees, and personal representative as if I were competent and not disabled.

TERMINATION

This Power of Attorney shall terminate upon written notification to my attorney-in-fact and recording of such revocation in any applicable jurisdiction.

IN WITNESS WHEREOF, I have hereunto set my hand this day of October 5, 1985.

  
SIGMUND T. MENTZEL

STATE OF INDIANA )  
                          )SS:  
COUNTY OF LAKE   )

On this, the 3rd day of October, 1985, before me, the undersigned Notary Public, personally appeared SIGMUND T. MENTZEL, known to me to be the person whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes therein expressed.

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

  
NOTARY PUBLIC

My Commission Expires:

10-20-87  
Lake

