M. Springet, 1336 Park Drive, Munster IN

435117 H056026 Jusi Pealtres

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DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, JACK P. LaFORCE, do hereby constitute and appoint MARILYN J. SPRINGET also known as LYNN SPRINGET, of Lake County, Indiana, as my true and lawful attorney, for me, in my name and stead for the following Catherine Condo #1638-C-1
To execute vouchers in my behalf or any and all purposes:

- allowances or reimbursements payable to me by the United States of America, including, but not restricted to, allowances and reimbursements for Social Security and Old Age Assistance, and to receive, endorse and collect the proceeds of checks payable to me from any person or corporation;
- To make, execute and deliver any bill of sale certificate of title as to any automobile or other personal property that I may now or hereafter own, either jointly or severally, or in which I have any interest;
- To demand, sue for, collect and receive $\frac{1}{4}$ accounts, claims or debts now due or that may hereafter become due, and make, execute and deliver receipts, releases or DEC 111987discharges therefor;
- To make, execute, or endorse any and all bills of exchange, notes, checks, money orders or drafts;
- To sell, pledge or encumber in any manner, any and all securities belonging to me, or which may hereafter belong to me, and to execute and deliver appropriate assignments therefor;
- In connection with any insurance policies or policy, in any company or association that I may own or may hereafter own, to apply for and execute all papers necessary to obtain loans thereon, or to surrender any or all said policies of insurance for their cash value, to change the mode of premium payment or to make any other election provided for in said policies of insurance, to accept and receipt for all distribution

of surplus, other benefits or dividends that may become due under any of said policies of insurance;

- of money and to secure such loans by executing mortgages, on real estate owned by me, either in my own name or as a joint owner, upon such terms and for such consideration as my attorney shall think fit, and to execute and deliver good and sufficient deeds or other instruments for the conveyance or transfer of same, with such covenants of warranty or otherwise as my attorney sees fit, and to give good and effectual receipts for all or any part of the purchase price or other consideration, and to execute all promissory notes, mortgages, and other instruments which may be necessary or proper.
- (h) To make, give and execute any consent that may be required by any medical provider including medical doctors, osteopathic doctors, or hospitals to render medical attention or treatment to me which in the opinion of my attorney may be necessary or required including the right of determination as to when and to what extent such attention or treatment may be withheld.
- (i) Without any way limiting the foregoing, and the foregoing not in limitation hereof, generally to do, execute and perform any other act, deed, matter or thing whatsoever that ought to be done, executed or performed or that in the opinion of my said attorney, ought to be done, executed or performed as fully and effectually as I could do if personally present.

Pursuant to the provisions of I.C. 30-2-11-1 et seq. I do specify and direct that this power of attorney shall not be affected by my subsequent disability or incapacity, if the same should occur, or by the lapse of time. It is my intent that the authority conferred upon my attorney-in-fact shall be exercisable notwithstanding my subsequent disability or incapacity and notwithstanding the lapse of time. In the event protective proceedings relating to my person or estate are subsequently

commenced, I do hereby nominate and appoint MARILYN J. SPRINGET also known as LYNN SPRINGET as conservator or as guardian of my estate and I do hereby nominate and appoint as guardian of my person MARILYN J. SPRINGET also known as LYNN SPRINGET in the event such proceedings determine the need for the appointment of such fiduciary.

I, the said JACK P. LaFORCE, do hereby ratify and confirm all that my said attorney shall do or cause to be done by virtue of this Power of Attorney.

IN WIT	NESS WHEREO	\mathbf{E} , I have here	eunto set my	hand and
seal at Mun o	ster),	Indiana, this	<u>35th</u> da	عور به الماريخ (الم
august	_, 1987.		مار مورد مار مورد المورد مار مورد المورد ا	MY O John
(_)		Harit R. Lan	1-1-1-20 July 19	TAX IN COLUMN
		JACK	P. LaFORCE	
			ر با مساور از	
STATE OF INDIANA)		9.	Cha North
) SS:			100 April 100 Ap
COUNTY OF LAKE)			

> Deborah Mc Farren Notary Public

My Commission Expires: 2-15-89

Resident of Lake County, Indiana

This instrument prepared by Palmer C. Singleton, Jr., Attorney At Law, 9013 Indianapolis Boulevard, Highland, Indiana, 46322.