90-150-н

THIS FORM HAS BEEN APPROVED BY THE INDIANA STATE BAR ASSOCIATION FOR USE BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTION OF SPECIAL CLAUSES, CONSTITUTES THE PRACTICE OF LAW AND MAY ONLY BE DONE BY A LAWYER.

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POWER OF ATTORNEY

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MAR 30 1990

V BELLE

TO

(ATTORNEY-IN-FACT)

The undersigned hereby nominates, constitutes and appoints .

<u>Marjorie C. Belle</u>

1210 New Jersey Street, Gary, Indiana 46403 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]

(D) (1) Banking and Financial Transactions -- (a) To open accounts, in my name or on my behalf, in my bank or trust company, savings and loan company, insurance company, credit union, or any other banking or sayings institution, and to deposit into such accounts, or into accounts now existing or hereafter established in my name; any anoney, 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, Threau, department or agency of the United States Government or by the Treasurer or similar official of any state, or any other official, bureau, department of agency of any States 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 of 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 the following safety deposit box: Box No. 839

dge Road, Munster Indiana 46321 (BRANCH) Illinois 60438 at American Lansing

(ADDRESS)

and in any and all other safety deposit boxes in my name either individually or jointly with any other person.

- (2) Motor Vehicles To sell, lease, maintain, insure, license and re-license any motor vehicle which I may own or in which I may have an interest and to execute and deliver any instruments required so to do.
- (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 and 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 (e) to receive dividends and other distributions on such securities.
- (6) Transfer of Interest in Real Estate To sell, convey, lease, grant an option to purchase, or otherwise transfer, for such consideration and upon such terms as my attorney-in-fact shall deem advisable, including a contract for conditional sale, and also to execute and deliver any deed, sales agreement, lease, contract and any other document(s) in such manner and form as may be necessary or required for my attorney-in-fact to transfer all or any part of my interest in the following described real estate: [Strike (a) or (b).]

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(b)— ()nly-the-real estate-commonly-known as
County,

Indiana and legally-described as follows, to wit:

55%

dentists, nurses, therapists and o may deem necessary for my physical pay them, or any of them, reasonab sent to my medical care, surgery,	employ and discharge physicians, psychiatrists, other professionals as my Attorney-in-Fact, mental and emotional well-being, and to ble compensation. To give or withhold conor any other medical procedures or tests.
in my name those things which such attorney deems e as fully as I could do personally for myself, reserving also to revoke the powers given in this instrument. Any act or thing, lawfully done by my attorney heirs, assigns and legal representatives.	I give my attorney-in-fact power and authority to do for me and expedient to and necessary to effectuate the intent of this instrument, ng unto myself, however, the power to act on my own behalf and y-in-fact under this instrument shall be binding on me and on my
<u>my wife, Marjorie C. Belle, </u>	state shall be commenced, I hereby nominate as Guardian(s) of my person and
_my_wife,_Marjorie_CBelle,	as Guardian(s) or Conservator(s),
as the case may be, of my estate, to serve without bond	d to the full extent permitted by law.
listed below may rely on this instrument being in e	ociations, investment firms, and/or other persons, firms or corporations effect and unrevoked by me unless I shall have executed a proper
instrument of revocation and delivered it, or caused it t	to be delivered, to such person, firm or corporation:
Holding Institution Bank One, Merrillville	Type of Account Account Number
Bank One, Merrillville	Certificates # 920010982509 & 940010806970
Citizen's Federal	Checking7-06-80002329
Citizen's Federal	Savings 10-09-80000028
All other persons firms and comments.	Certificates # 10-02-40000115 & 10-09- this instrument may be delivered may rely on its being in effect
and unrevoked by me unless I shall have required	a proper instrument of revocation and recorded it are among the
be recorded, in the Office of the Recorder of	a proper instrument of revocation and recorded it, or caused it to
A. This Power of Attorney shall not be affect it being my intention that this instrument constitution of Attorney Act.	visions by Striking ALL INAPPLICABLE PROVISIONS: ted by my subsequent disability or incapacity, nor by lapse of time, ute a durable power of attorney under the Indiana Uniform Durable terminate and breme and analyzed
	(DATE)
C.—This Power of Automost shall not be affected by	y disability on inequacity prior to such date. red by dapse of time; but shall automatically remainate and become
mill and void upon my disability or incapacity:	
D This Power of Anomey shall automatically	terminate and become mili and void on
, or apon my disability or incap	(DATE)
Signed this 16th day of March which shall be considered an original.	19 90 in five counterparts, each of
Counterpart No]	GRANTOR William V. Belle 317-89-2371
	317-09-2371 GRANTOR'S SOCIAL SECURITY NUMBER
	1210 New Jersey Street
	Gary, Indiana 46403 GRANTOR'S ADDRESS
STATE OF INDIANA	
COUNTY OF LAKE) SS:	
•	nd for said County and State, thisday of red the Grantor named above, and acknowledged the execution of this f the Grantor, for the uses and purposes therein stated.
,	·
in withness whereOff I have hereunto set n	ny hand and official seal the day and year last above written.
	/ / / \
	NOTARY PUBLIC Susan J. Brown
My Commission Expires	NOTARY PUBLIC Susan J. Brown Resident Of: Jasper County.
My Commission Expires This instrument prepared by	Justin J. Blown