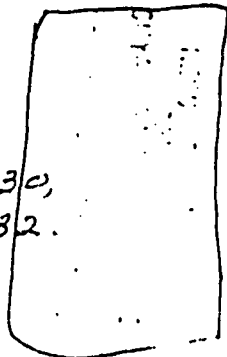


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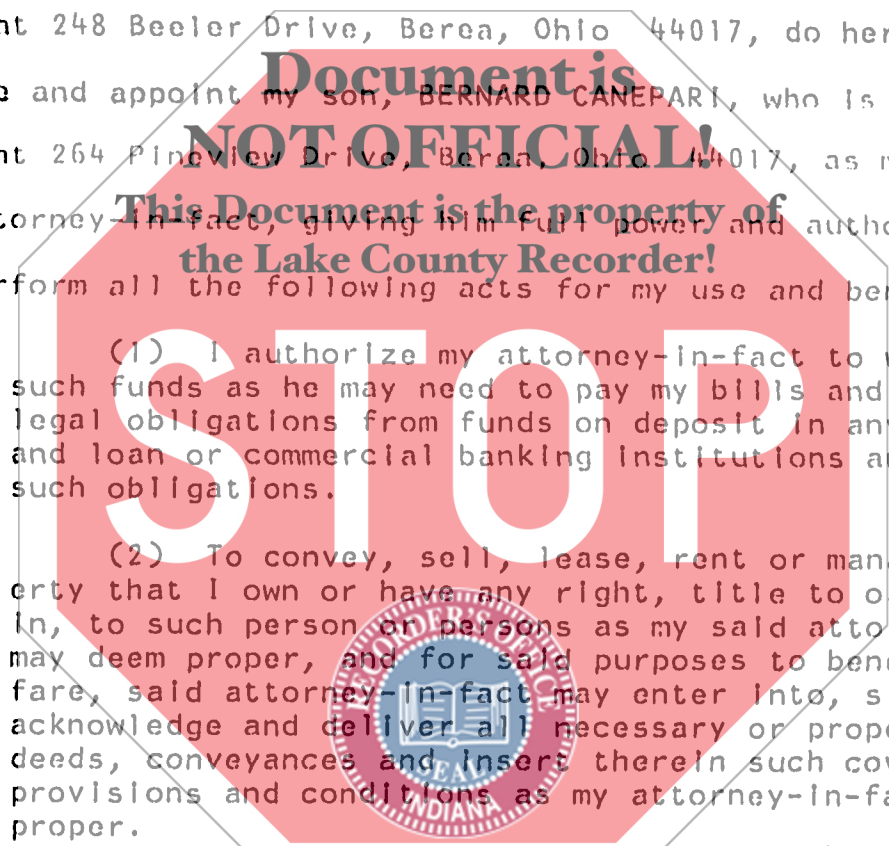
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Key # 30-60-30,
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DURABLE GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS that I, VERONICA CANEPARI, residing at 248 Beeler Drive, Berea, Ohio 44017, do hereby make, constitute and appoint my son, BERNARD CANEPARI, who is presently residing at 264 Pineview Drive, Berea, Ohio 44017, as my true and lawful attorney-in-fact, giving him full power and authority to do and perform all the following acts for my use and benefit:



(1) I authorize my attorney-in-fact to withdraw such funds as he may need to pay my bills and other just legal obligations from funds on deposit in any savings and loan or commercial banking institutions and to pay such obligations.

(2) To convey, sell, lease, rent or manage any property that I own or have any right, title to or interest in, to such person or persons as my said attorney-in-fact may deem proper, and for said purposes to benefit my welfare, said attorney-in-fact may enter into, sign, execute, acknowledge and deliver all necessary or proper contracts, deeds, conveyances and insert therein such covenants, provisions and conditions as my attorney-in-fact may deem proper.

(3) To negotiate, execute, acknowledge and deliver deeds upon any real property owned by me, or jointly with others; to collect, receive and receipt for all rent or monies due and payable thereunder, to make repairs on the premises as my said attorney-in-fact deems proper or necessary, to insure said premises, to pay taxes, when due, to terminate any contracts and to take possession of the premises or to institute and prosecute actions or recovery of rent or recovery of premises, as my at-

LAWYERS TITLE
ONE PROFESSIONAL
SUITE
CROWN POINT

STATE OF OHIO
RECORDS & DEEDS DIVISION

Accom

FILED

APR 18 1990

Ann R. Anton
AUDITOR LAKE COUNTY

000384

torney-in-fact shall deem necessary or proper.

This shall include, but not be limited to, real property owned by me which is situated in East Chicago, Lake County, Indiana, and more particularly described as follows:

PARCEL NO. 1 - KEY #30-60-30

Resubdivision, Part Northwest, S.29 T.37 R.9
North Half Lot 33, All Lot 34, Block 14.

PARCEL NO. 2 - KEY #30-60-31

Resubdivision, Part Northwest, S.29 T.37 R.9
All Lot 35, Block 14.

PARCEL NO. 3 - KEY #30-60-32
**This Document is the property of
the Lake County Recorder!**

Resubdivision, Part Northwest, S.29 T.37 R.9
South Half Lot 36, Block 14.

(4) To receive, endorse and cash checks from the Social Security Administration, and from any bank or savings and loan association or any other checks and certificates due me.

(5) To take possession of any and all monies, goods, chattels and effects belonging to me in any bank in any accounts wheresoever found; to draw, collect, deposit to my credit in any bank and to enter any safe deposit box I may have in any bank.

(6) To endorse and collect any and all checks, drafts or other instruments for money payable to me; including accounts receivable and any other uncollected monies due me; to sell and convey by bill of sale, certificate of transfer, assignment or other proper conveyance, for such prices and upon such terms, as he may consider proper on any and all of my personal goods and chattels, and to receive payment therefor directly from such purchasers and to give receipt therefor, the same as though coming directly from me; to sell any securities that I may own or in which I have a joint interest.

(7) To pay or collect debts, with authority to compromise claims or demands; to institute legal proceedings

to prosecute, demand or defend me on all sums of money, debts, claims or demands which are or shall become due, owing and payable to me or detained from me by any person whatsoever.

(8) To act as my true and lawful attorney for me and in my name, place and stead and to execute and file the income tax returns or declarations of estimated tax or any other tax forms required either by the State of Ohio or the Federal Government for prior or current tax years and for each year on and after the date of this instrument, unless specifically revoked by me.

(9) To contract with and arrange for my entrance to any hospital, nursing home, health center, convalescent home, or similar institution, and to satisfy such obligations in connection therewith; to consent on my behalf to medical and surgical procedures and to make medical care decisions.

In order to protect my right to privacy with regard to my health care decisions said attorney-in-fact shall have the power to:

- (a) Gain access to all of my medical records;
- (b) Employ and discharge health care personnel, such as physicians, nurses, therapists and other medical professionals, as said attorney-in-fact deems appropriate;
- (c) To request that I not be kept alive by artificial or heroic means in the event that I become so severely disabled, by illness or injury or deterioration of age, that I am unable to live actively or to communicate with others or engage in the normal human process of thought and, in the best judgment of my attending physician and one other physician, there is no reasonable expectation of my recovery from such physical or mental disability;
- (d) To withhold or discontinue treatment in the event that I am suffering from a terminal illness which will result in my imminent death and for which such treatment will merely prolong my life. My attending physician and one other physician shall determine if my condition is terminal and whether my death

Is imminent;

(e) To discontinue treatment in the event that I become unconscious with a negligible change of regaining consciousness. My personal physician and one other attending physician shall determine my chance of recovery; and

(f) To request the administration of pain relief for my terminal suffering, regardless of the fact that it may hasten my death.

No individual acting in compliance with my wishes as expressed through my attorney-in-fact, shall bear any liability to me, my estate or my heirs.

I confer these powers upon my said attorney-in-fact after careful consideration and with a complete understanding of their importance. I do not fear death as much as I fear the indignity of deterioration, dependence and hopeless pain.

(10) To represent me during my administration of any estate in which I have a share by Will or by law, and collect for me any devise, bequest or legacy to which I am entitled. To accept and receive service, to execute consents and waivers, to receipt and deliver proper vouchers, receipts and discharges with full power to institute all steps or proceedings necessary to recover my share.

(11) To vote at any general or special meeting of stockholders all stock owned, held, or controlled by me or standing in my name.

(12) This instrument is to be construed and interpreted as a general power of attorney. The enumeration of specific items, acts, rights or powers herein does not limit or restrict, and is not to be construed or interpreted as limiting or restricting, the general powers herein granted to said attorney-in-fact.

(13) An executed duplicate of this Power of Attorney, or a photostatic copy thereof, delivered by me or by my said attorney to any third party, will be conclusive against me and said attorney-in-fact as to such third party that this Power of Attorney has not been terminated and will continue in effect until such third party is advised by

written notice from me or from said attorney of such termination.

(14) The rights, powers and authority of said attorney-in-fact to exercise any and all of the rights and powers herein granted shall commence and be in full force and effect on this 30th day of JUNE, 1988, and such rights, powers and authority shall remain in full force and effect.

(15) This Power of Attorney shall not be affected by my disability. The authority of my attorney-in-fact is exercisable by him as provided in this written instrument notwithstanding any later disability, incapacity or adjudged incompetency that may occur to me for whatever reason. All acts done by my attorney-in-fact pursuant to this written instrument during any period of my disability, incapacity, or adjudged incompetency shall have the same effect, and inure to the benefit of and bind myself or my heirs, devisees, and personal representative, as if I were competent and not disabled or incapacitated.

(16) I give and grant unto my said attorney-in-fact full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in the premises as fully, to all intents and purposes, as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney-in-fact, or his substitute shall lawfully do or cause to be done by virtue hereof.

IN WITNESS WHEREOF, I have on this 30th day of June, 1988, at BEREA, Ohio, signed this Power of Attorney.

Signed in the presence of:

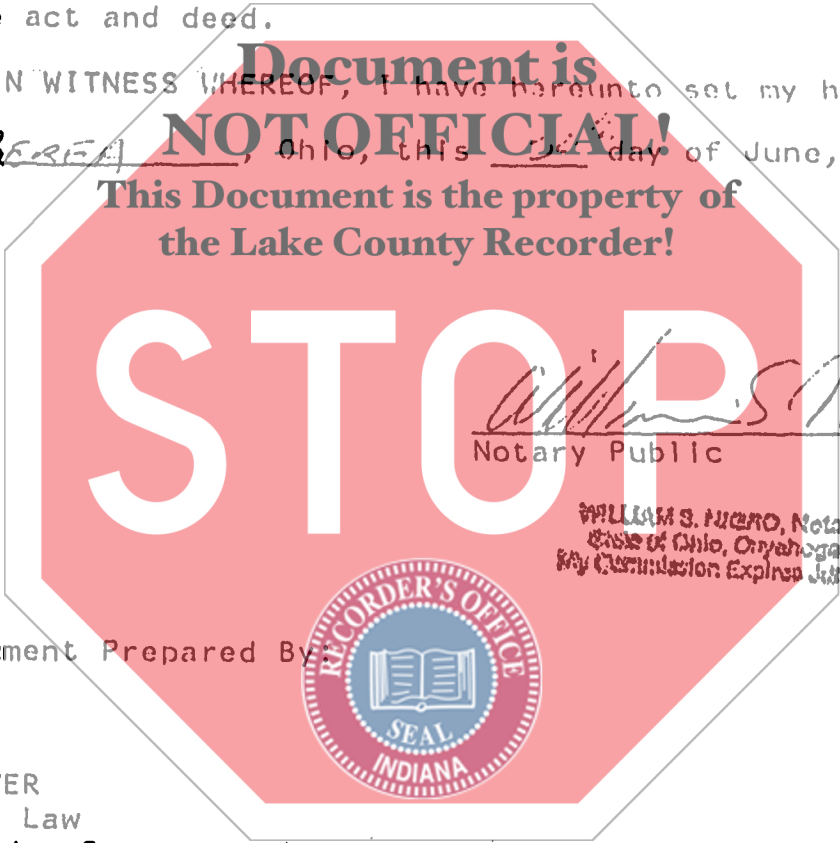
Frank H. Kovachy
William S. Nigro

Barbara
VERONICA CANEPARI

STATE OF OHIO)
) SS:
COUNTY OF CUYAHOGA)

BEFORE ME, a Notary Public in and for said County, personally appeared the above named VERONICA CANEPARI, who acknowledged that she did sign the foregoing Power of Attorney, and that the same is her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Berea, Ohio, this 24 day of June, 1988.



This Instrument Prepared By

JOHN H. BEVER
Attorney at Law
33 East Bridge Street
Berea, Ohio 44017

torney-in-fact shall deem necessary or proper.

This shall include, but not be limited to, real property owned by me which is situated in East Chicago, Lake County, Indiana, and more particularly described as follows:

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Resubdivision, Part Northwest, S.29 T.37 R.9
All Lot 35, Block 14.

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South Half Lot 36, Block 14.

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(6) To endorse and collect any and all checks, drafts or other instruments for money payable to me; including accounts receivable and any other uncollected monies due me; to sell and convey by bill of sale, certificate of transfer, assignment or other proper conveyance, for such prices and upon such terms, as he may consider proper on any and all of my personal goods and chattels, and to receive payment therefor directly from such purchasers and to give receipt therefor, the same as though coming directly from me; to sell any securities that I may own or in which I have a joint interest.

(7) To pay or collect debts, with authority to compromise claims or demands; to institute legal proceedings

to prosecute, demand or defend me on all sums of money, debts, claims or demands which are or shall become due, owing and payable to me or detained from me by any person whatsoever.

(8) To act as my true and lawful attorney for me and in my name, place and stead and to execute and file the income tax returns or declarations of estimated tax or any other tax forms required either by the State of Ohio or the Federal Government for prior or current tax years and for each year on and after the date of this instrument, unless specifically revoked by me.

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(f) To request the administration of pain relief for my terminal suffering, regardless of the fact that it may hasten my death.

No individual acting in compliance with my wishes as expressed through my attorney-in-fact, shall bear any liability to me, my estate or my heirs.

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(10) To represent me during my administration of any estate in which I have a share by Will or by law, and collect for me any devise, bequest or legacy to which I am entitled. To accept and receive service, to execute consents and waivers, to receipt and deliver proper vouchers, receipts and discharges with full power to institute all steps or proceedings necessary to recover my share.

(11) To vote at any general or special meeting of stockholders all stock owned, held, or controlled by me or standing in my name.

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written notice from me or from said attorney of such termination.

(14) The rights, powers and authority of said attorney-in-fact to exercise any and all of the rights and powers herein granted shall commence and be in full force and effect on this 30th day of JUNE, 1988, and such rights, powers and authority shall remain in full force and effect.

(15) This Power of Attorney shall not be affected by my disability. The authority of my attorney-in-fact is exercisable by him as provided in this written instrument notwithstanding any later disability, incapacity or adjudged incompetency that may occur to me for whatever reason. All acts done by my attorney-in-fact pursuant to this written instrument during the period of my disability, incapacity, or adjudged incompetency shall have the same effect, and inure to the benefit of and bind myself or my heirs, devisees, and personal representative, as if I were competent and not disabled or incapacitated.

(16) I give and grant unto my said attorney-in-fact full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in the premises as fully, to all intents and purposes, as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney-in-fact, or his substitute shall lawfully do or cause to be done by virtue hereof.

IN WITNESS WHEREOF, I have on this 30th day of June, 1988, at BEREA, Ohio, signed this Power of Attorney.

Signed in the presence of:

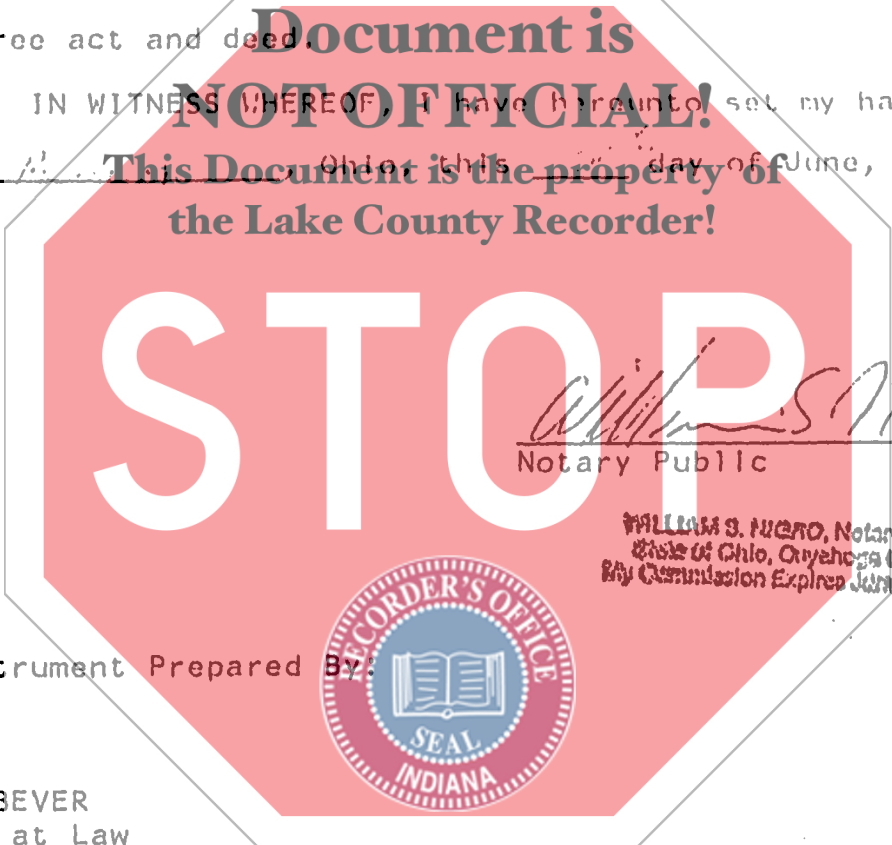
X Vincent H. Kovachy
William S. Nigro

Bernice
VERONICA CANEPARI

STATE OF OHIO)
) SS:
COUNTY OF CUYAHOGA)

BEFORE ME, a Notary Public In and for said County, personally appeared the above named VERONICA CANEPARI, who acknowledged that she did sign the foregoing Power of Attorney, and that the same is her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Beaumont, Ohio, this 22 day of June, 1988.



This Instrument Prepared By:

JOHN H. BEVER
Attorney at Law
33 East Bridge Street
Berea, Ohio 44017