

15.2199

TICOR TITLE INSURANCE
Valparaiso, Ind. 46383

(2)

097426

Power of Attorney

Know All Men by These Presents, That HULDA E. HAMANN

have made, constituted and appointed, and by these presents do make, constitute and appoint JOYCE ANN COLEMAN true and lawful Attorney for HERSELF and in HER name, place and stead

THIS IS A SPECIAL POWER OF ATTORNEY EFFECTIVE SOLELY AND EXCLUSIVELY FOR THE PURPOSE OF SELLING REAL ESTATE. THIS POWER IS LIMITED TO THE EXECUTION OF ANY ACCEPTANCES, CLOSING STATEMENTS, AND OTHER RELATED DOCUMENTS AND INSTRUMENTS, FOR THE SALE OF REAL ESTATE DESCRIBED AS FOLLOWS:

LOT 50 IN H & S ADDITION TO HOBART, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 13, PAGE 12, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

TICOR TITLE INSURANCE
Crown Point, Indiana



APR 27 9 46 AM '99
FILED

giving and granting unto JOYCE ANN COLEMAN said Attorney full power to do every act necessary to be done about the premises as fully as SHE might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that JOYCE ANN COLEMAN said Attorney, or substitute shall lawfully do or cause to be done by virtue thereof.

In Witness Whereof, The said JOYCE ANN COLEMAN has hereunto set her hand and seal this 13th day of APRIL 19 99

Signed, sealed and delivered in presence of Hulda E. Hamann (SEAL)
HULDA E. HAMANN

WITNESSED: Charles Polarek
Charles Polarek

This instrument prepared by: HULDA E. HAMANN

550

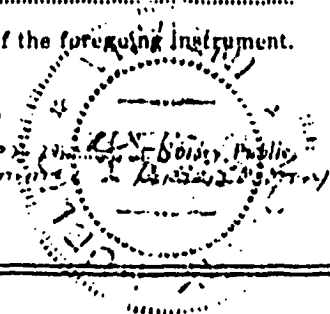
STATE OF INDIANA,PORTER.....County, ss:

Before me, the undersigned, a Notary Public in and for said County, this
18th day of APRIL 1930, came.....
HULDA E, HAMANN

....., and acknowledged the execution of the foregoing instrument.

Witness my hand and official seal.

Benjamin N. K...
Notary Public
Lake County, Indiana



My Commission expires.....5-1-90.....
COUNTY OF RESIDENCE: PORTER



POWER OF ATTORNEY

FROM

TO

Received for record this.....

day of....., 19.....

at..... o'clock m., and recorded

.....Record,

No..... Page.....

Recorder..... County.

Fee, \$.....