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.

COMMUNITY TITLE CO.

140100

POWER OF ATTORNEY

421 W. 81st Avenue Merrillville, IN 48410

r			OF				
***	*	;	MARY LOU G				
			(GRANTOF	0		•	
			WILLIAM H.	TODIN			
			(ATTORNEY-IN-		-		
				114114	. 11 . m. 1: J.,	111	33.5
The undersigned	i hereby non	ninates, constitut	es and appoints	WITTIAM	H. Tobin		
whose address is	5261 F	lohman Avenu	ie, Hammond	, Indiana	46320	:•-	
as my true and lawfu	ıl attorney-in	-fact to do and p	erform for me	and in my na	me the following:	•	,
**		s (Strike	any paragraph	not applicab	le).	. •	
465 4.4				• • • • • • • • • • • • • • • • • • • •			.
(1) - Banking a	nd=Financial cavings and le	-Transactions	- (a) To open -i	iocounts, in . v. cradit unio	my-name: or-on-i	my behalf, in nking or cavi	iony bunk
and to deposit	into such: ac	counts, or into	accounts now c	xisting or he	m, or any other ba creafter established	nking or savii Lin-mv nam	any mon
checks, notes, o	irafts, accept	ances or other	evidences of inc	debtedness p	hyable to or below	nging 40 me.	including t
not being ilimit	ed to, checks	s or drafts issue	dsby the Treas	urer of the	United States or	any other of	Ticial, bure
department or	agency of the	e United States	Government of	Aby the frea	surer or similar-o	official of any	state, or a
withdraw or re	urcau, ucpar ceive fromes	unent or agenc	Morany States	of the belai	or other governm	ient body; an make such	endorseme
and to sign suc	h document	stas may be rec	uired-in-conne	tion with do	position any of	such accour	its: (c) to s
checks, withdra	iwals; drafts,	receipts or oth	er documents	is may be n	equired in connection and to remove	hion*with dis	sbursement
withdrawal*from	n or receipt	of such accoun	is; and (d) tox	ave access t	and to remove	any or alli of	f∉my prope
contained or he	ld'in the follo	owing safety depo	sit box: Box-N	0,	_located at:		
	UKSIII	UTION):	,		(BRAN	CH)	
_ :							
	-11: -4b C-		(ADDR				·
(2) Motor Vel	iicles — To	sell leace main	taininsure lic	once and re-	ll <mark>y or jointly with-</mark> license any meter	any-other-per	son.
or in which I m	ay have an in	iterest and to exc	cute and deliver	any instrum	ents required so to	do:	1 111dy (1
(3) Tax Matte	rs: — (a) To	o prepare, sexecu	ite and lile on	my behalf i	income and other	tax returns	and pay a
amount determ	ined due; (b)	to přepaře, exec	ute and file one	ny behalf-doc	cuments.pertainin	real estate	e and person
					to act on my bo		
		otiate, comprom	ise and settle t	ax disputes,	including appeali	ng determina	tions of va
assessments and	taxes due,	An) To tomorous	E . SEAL.	3	duct my business	offelia local	. منا حالي
					erty which I may		
					or any other t		
an interest; and							
					nd to sell or othe	rwise dispose	of, securiti
including but n	ot-limited to,	stocks, bonds,	notes, and othe	r securities o	r evidences of ind	lebtedriess, all	ltat such pr
					any such securit	ies∘in my,∙na	me, in pers
or by proxy; an		***					
			•		t an option tospu ct shall deemrady		
					ent∤lease, contrac		
					torney-in-fact*to		
my interest in th							
•							
(a)/	my and all re	eal estate in whic			ter:acquire;:an inte	rest	
(b) (Inly the real	estate commonly		or]			
	•	·			1		
Hoba	rt.		, Indiana loca	sted in	Lake		Coun
Indiana an	d legally desc	ribed as follows,	to-wit:				
SEE -	COMMUNITY	TITLE COM	ANY COMMIT	MENT NO.:	L 3196.		٠
			FIL	RID			
				A.A A.J			

DEC 14 1990

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13 13 W

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41			as Guard	ian(s) of my person and
The following named listed*below may rely or instrument of revocation Hold	estate, to serve without bond to banks, savings and loan associ this instrument being in eff and delivered it, or caused it to ing Institution	to the full extent permitted intions, investment firms, an fect and unrevoked by me be delivered; to such person Type of Account	by law. d/or other persor unless 1/shall#l n; firm or corpor	nave executed as properation: Account/Number
Jerry C. Harber	7 Community Title Co	Commitment	No. 1.3	196
and unrevoked by me u	and corporations to whom inless I shall have executed a of the Recorder of	proper instrument of revo	cation and reco	rdedit, or caused it to
SELECTIONLY: ONE O A. This Power of it being my intention	FTHE FOLLOWING PROVING PROVING Attorney shall inotice affected in that this instrument constitute.	ISIONS BY STRIKING A diby my subsequent disabi te a durable power of actor	LINAPPLICA lity or incapacity ney andersthe In	ABLE PROVISIONS: y, nor by lapse of time diana Uniform Durabl
	Act, the Lake C Attorney shall automatically to			cember 31, 1990:
C. This Power of	ut shall not be affected by my. Attorney shall not be affected			terminate and becom
	my disability or incapacity. Aftorney shall automatically te	erminate and become null a	nd void on _	
,,,	r upon my disability or incapa	chy, whichever shall lirst oc	Attra .	(DATE)
Signed this 5th	day ofDecember	19 :90	in one	_ counterparts, each (
which shall be considered		WDER'S		
Counterpart-NoOne				•
		mary Low Ge	raid	
	EII,	CHANTON WILLIAM		
		311-40-9565	NUMBER .	
			•	
		913 South East S GRANTORS ADDRESS	creet, Gro	wn Point, IN 46
STÂTE OF INDIANA	· •			
) SS:			
COUNTY OF LAKE) •			
Before me, the under December	rsigned, a Notary Public in and 19-90 , personally appeared	for said County and State	this <u>5th</u>	day
 ,	the voluntary act and deed of t			
IN WITNESS WHE	EREOF, I have hereunto set my	v hand and official scal the	day and year last	above written.
36.79.73			N. 00	
		Disa (1	. Will	2/U
	beraut .	NOTANT PUBLIC LISA	A. MILLER	
	EX P			
My Commission Expires	5-24-94	Resident Of:	Lake	County
My Commission Expires	<u> </u>	Resident Of:	Lake	County