

450906 LD

Citizens 707 Ridge Rd,
Munster
#4034

140325

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, That ELSIE M. VAIL has made, constituted and appointed and by these presents does make, constitute and appoint HAROLD D. VAIL true and lawful Attorney for me and in my name, place and stead for all lawful purposes including but not limited to:

1) The conveyance and/or mortgage of real estate owned by me or in which I have an interest by me in Lake County, Indiana, and in particular:

Key # 33-107-15

A) South 8 feet of Lot 13, all of Lot 14 and the North 21 feet of Lot 15 in Block 9, in Forest Dale, Hammond, as shown in Plat Book 20, page 16, in Lake County, Indiana: commonly known as: 6723-6725 Wicker Avenue, Hammond, Lake County, Indiana.

NOT OFFICIAL!

B) Lots numbered 13 and 14 in Block No. 16 as marked down on the recorded plat of Unit 4 of Woodmar, Hammond, Lake County, Indiana, as the same appears of record in Plat Book 17, Page 22, in the Recorder's Office of Lake County, Indiana: commonly known as 7134 Baring Parkway, Hammond, Indiana, Key No. 26-36-0392-0013

Key # 46-43-17 thru

C) Vacant lots in Gary (Miller), Indiana: The East 1/2 of Lot 14 and all of Lots 15, 16 and 17, Miller Gardens, being a resubdivision of Block 4 of the subdivision of West 14.80 acres of Block 2, of Miller Station a subdivision of the South 1/2 of Section 6, Township 36 North, of Range 7 West of the Second Principal Meridian, in Lake County, Indiana. Key Nos. 25-46-0043-0017 through 21.

2) Execution and/or endorsement of all checks, drafts, and/or other negotiable instruments as defined by the Uniform Commercial Code.

3) Making of checks payable to third parties drawn against my checking account held at Calumet Federal Savings & Loan Association (Hammond, Indiana) and any and every other act which I am legally empowered to do.

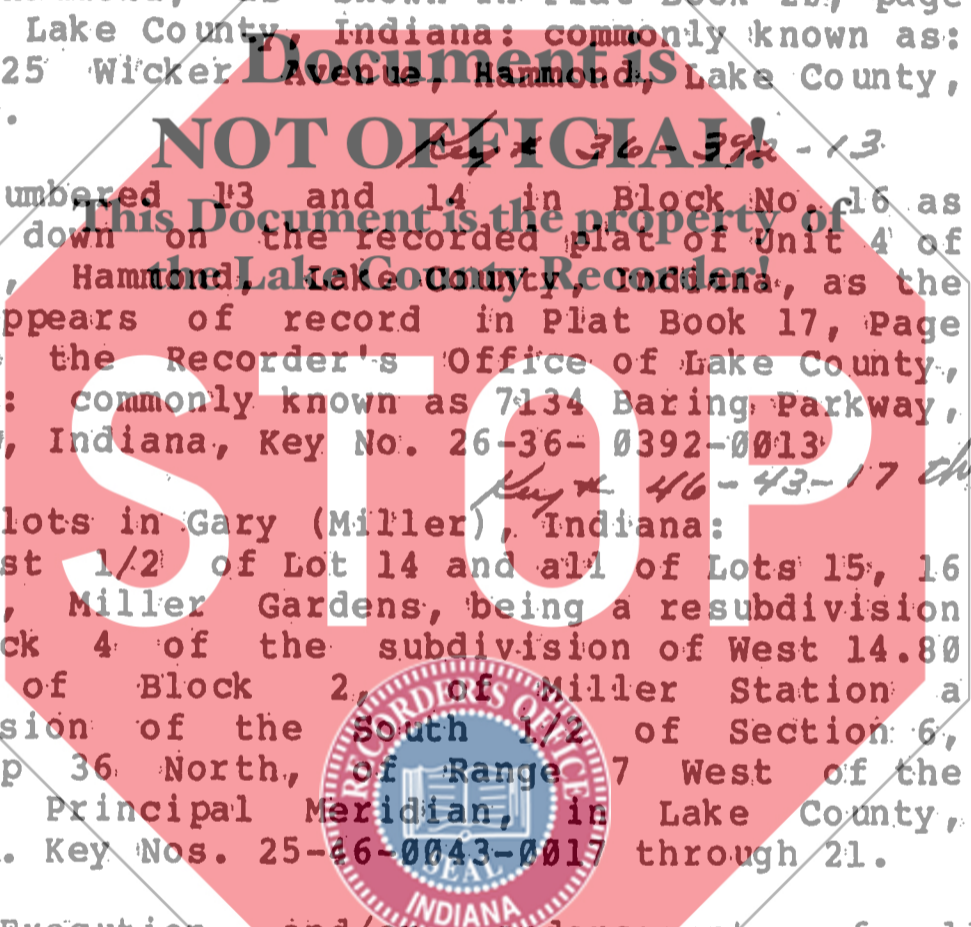
4) Medical and Hospital care, etc., to act in my stead in my admission to hospitals, clinics, and nursing homes, and in giving consents to medical and surgical procedures, and operations, and to do all things I can do in respect to receiving any health care I may require.

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INDIANA DEPARTMENT OF REVENUE
STATE TREASURER
LAKE COUNTY
FILED FOR RECORD

DEC 21 1 50 PM '90
ROBERT RECORDER
INDIANAPOLIS



5) I give and grant unto said Harold D. Vail said Attorney full power to do every act necessary to be done about the premises as fully as I might or could do if personally present, with full power of substitution and revocation and hereby ratify and confirm all that said Harold D. Vail said Attorney or my lawfully appointed shall lawfully do or cause, to be done by virtue thereof. Any act or thing lawfully done by my attorney-in-fact under this instrument shall be binding on me and on my heirs, assigns and legal representatives.

This Power of Attorney shall not be affected by my subsequent disability or incapacity, nor by lapse of time, it being my intention that this instrument constitute a durable power of attorney under the Indiana Uniform durable Power of Attorney Act.

IN WITNESS WHEREOF, The said Elsie M. Vail has hereunto set her hand and seal this 31st day of May, 1990.

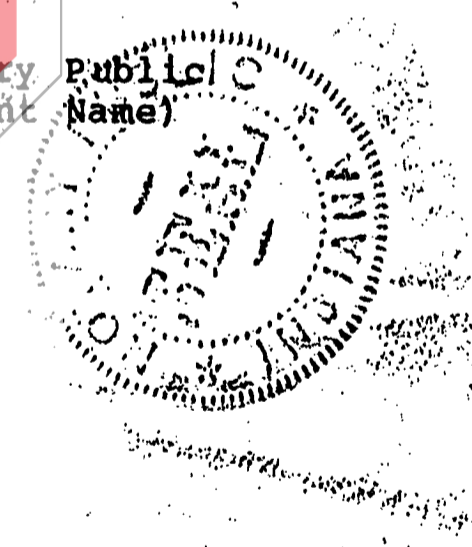
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the Lake County Recorder!


Mark of Elsie M. Vail, Affiant

Before me, the undersigned, a Notary Public in and for said County and State, this 31st day of May, 1990, came Elsie M. Vail, and acknowledged the execution of the foregoing instrument. WITNESS MY HAND AND SEAL.


MARIAN E. HENSLEY, Notary Public
(Print Name)

My commission expires: April 28, 1994



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THIS INSTRUMENT WAS PREPARED BY: PAMELA P. KOSENKA, ATTORNEY AT LAW, 2930 RIDGE ROAD, HIGHLAND, INDIANA 46322 (219-972-7299)