

Name:

91039757

Address:

LTIC# 51894

LAWYERS TITLE INS. CORP.
ONE PROFESSIONAL CENTER
SUITE 215
CROWN POINT, IN 46307

This Instrument Prepared by: Brad & Patricia Walsh
Address: 6716 Woodlake Dr. Apt #285
Orlando, Fl. 32810

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

Power of Attorney

Know All Men By These Presents:

That BRAD WALSH AND PATRICIA A. WALSH
have made, constituted and appointed, and by these presents do

STATE OF INDIANA/S.S. NO.
LAKE COUNTY
FILED FOR RECORD
AUG 7 9 30 AM '91
ROBERT (BOB) REEB
RECORDER

make, constitute and appoint CHERYL L. BALSTER
lawful attorney for US and in OUR name, place and stead TO EXECUTE ALL

DOCUMENTS REGARDING THE CLOSING OF THE REAL
PROPERTY LOCATED AT 3525 ST. JOSEPH PLACE, HOBART
IND. MORE PARTICULARLY DESCRIBED AS LOT #39 IN
STIMSONS SUBDIVISION UNIT "B" AS PER PLAT THEREOF,
RECORDED IN PLAT BOOK 31, PAGE 9, IN THE OFFICE OF THE
RECORDER OF LAKE COUNTY, INDIANA #18-324-23

giving and granting unto CHERYL L. BALSTER said attorney full power
and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and
about the premises as fully, to all intents and purposes, as WE might or could do if personally
present, with full power of substitution and revocation, hereby ratifying and confirming all that

CHERYL L. BALSTER said attorney or
HER substitute shall lawfully do or cause to be done by virtue hereof.

In Witness Whereof,
day of JULY, in the year one thousand nine hundred and NINETY ONE

Signed, sealed and delivered in the presence of:

Witness Signature: Grace Blough
Printed Name: Grace Blough
Witness Signature: Carol Blough
Printed Name: Carol Blough

Signature: Brad Walsh and Patricia A. Walsh
Printed Name: BRAD WALSH AND PATRICIA A. WALSH
Post Office Address: 6716 WOODLAKE DR #285, ORLANDO, FL.
32810

State of
County of

FILED

I Hereby Certify that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared PATRICIA A. WALSH AND BRAD A. WALSH
and who executed the foregoing instrument and acknowledged before me that BRAD A. WALSH to me known to be the person described in executed the same.

Witness my hand and official seal in the County and State aforesaid this
of July 10, A.D. 1991



Notary Signature: [Signature]
NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
Printed Name: [Name]
My Commission Expires: AUGUST 04, 1993
My Commissioned By: THOM HUCKLEBERRY & ASSOCIATES

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