106 Church M

JAN 10-1992

92001921

DURABLE GENERAL POWER OF ATTORNEY AND MEN M. ONTO APPOINTMENT OF HEALTH CARE REPRESENTATIVE MOTION LIMIT COUNTY

BY: MARY A. PEARCE

I APPOINT my son, DENNIS W. STEPHENS, whose address is 406 Church Street, Crown Point, Indiana 46307, my attorney-in-fact to do any lawful act for me in my name, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument.

By way of illustration only, and not intending any limitation,

I specifically grant to my attorney-in-fact the POWER TO:

I'. Buy, receive, lease accept, or otherwise acquire any property. (As used in this power, the word "property" shall include any custody, possession interest, or right pertaining to property of any character.) Sell convey, lease grant an option to purchase, or otherwise transfer of convey, lease grant an option to purchase, or otherwise transfer of convey, lease grant an option to purchase, or otherwise transfer such consideration and upon such terms as my attorney-in-fact shall deem advisable; including a contract for conditional sale; and also to be accorded and deliver any deed, sales agreement, lease, contract and any other document(s) in such manner and form as may be necessary or required for my attorney-infact to transfer all or any part of my interest in the following described real estate:

A duplex commonly known as 610-612 N. Colfax, Griffith, Indiana 46319, and legally described as follows:

The East 1/2 of Lot 8 in Block 7 in Plat of Resubdivision of Blocks 6 and 7 in James Soak Grove Addition to Griffith, as per plat of Said resubdivision, recorded in Plat Book 24, page 32, in the Office of the Recorder of Lake County, Indiana.

(Tax Key Number 26-173-12)

2. Take, hold, possess, invest, lease, let, or otherwise manage my property. Eject, remove, or relieve tenants, holders, or others of possession of my property. Maintain, protect, preserve, insure, remove, ship, store, transfer, repair, rebuild, modify, subdivide, or improve my property. Enter safety deposit boxes and remove or deposit items.

3. Transact any kind of business, including the receipt, recovery, collection, payment, compromise, settlement, or adjustment of accounts, legacies, bequests, distributions, interests, employee benefits, annuities, demands, debts, taxes, and obligations due or

payable by or to me.

4. Make, endorse, accept, receive, sign, seal, execute, acknowledge, and deliver deeds, assignments, agreements, certificates, mortgages, security agreements, hypothecations, checks, notes, bonds, vouchers, receipts, and other instruments.

5. Deposit or withdraw in either my name, the attorney's name, or jointly in both names funds, negotiable paper, credit, rights, or money that may come into the attorney's hands or that may be on deposit for me.

6. Institute, prosecute, litigate, defend, compromise, arbitrate, or dispose of legal, equitable, or administrative claims, defenses, hearings, actions, suits, attachments, arrests, distresses,

or other proceedings.

7. Act as attorney or proxy with respect to any securities, shares, stocks, bonds, or other investments, rights or interests.

00622 10

Prepare, execute, and file income, gift, estate, or other tax returns and other governmental reports, applications, requests, and documents and to represent me in all tax proceedings. 9. Disclaim any power or discretion (whether granted by this instrument, by statute, or otherwise) that is considered burdensome, unnecessary, or unwise. 10. Disclaim gifts, inheritances, or other transfers to me.
11. Purchase U.S. bonds redeemable at par for the payment of U.S. estate taxes and borrow funds to make such purchases.
12. My attorney-in-fact shall NOT, however, have any authority to deal with any insurance that I may own upon the life of the attorney-in-fact. 13. Perform every act, deed, matter, and thing with respect to my estate, property, and affairs as fully and effectually as I might if personally present and acting. 14. Also, to perform every act, deed, matter, and thing necessary to provide for my personal care and well being, including inter alia, selection of my abode, employment of companions or practical nurses, purchase or repair of my clothing, travel, recreational nurses, purchase or repair of my clothing, travel, recreations. tion, entertainment, funeral and burial arrangements, and spiritual and religious needs, and to carry out my personal responsibilities, whether legal or moral provision for my dependents. 15. Serve as my health care representative in the event of my incapability of consenting, as authorized by I.C. 16-8-12, and, to this end: Select, engage, and discharge health care providers and facilities. Authorize retreat from falling crant releases to health care providers and facilities out withdraw, or withhold consent to health care. Delegate all or a part of this authority to any eligible individual who has not been disqualified as provided in I.C. 16-8-12. (This appointment of a health care representative is not to be considered a contradiction of a living will I may execute, whether simultaneously, previously, or hereafter. My living will shall be considered as expressing my intention, but my health care representative's action in consenting or withholding or withdrawing consent to life-prolonging procedures shall take precedence.) dence.) l6. Upon any terms or limitations specified: Substitute another in his place as my actorney in-fact under this instrument. Remove a substitute and revoke any delegation of authority and make further substitutions and other delegations. Engage and dismiss agents, counsel, or employees, and appoint or remove any successor, substitute, or agent. Delegate one or more of any of the powers granted in this instrument to one or more other persons. THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY MY SUBSEQUENT DISABILITY OR INCAPACITY OR BY LAPSE OF TIME. If proceedings are ever begun for the appointment of a guardian, conservator, or like representative for my person or estate, it is my preference that whoever may be serving as my attorney-in-fact under this power be appointed to that office. This power of attorney is executed and delivered in Indiana in contemplation of Indiana law, and it shall be interpreted and governed in accordance with Indiana law. My attorney-in-fact is expressly authorized to create, revoke, - 2 -

or amend trusts in my name and to transfer any of my property to the trustee for administration and disposition in accordance with the provisions of such a trust or the provisions of any trust that I may establish.

It is not my intention to grant any beneficial interests in my estate by this instrument but to grant to my attorney-in-fact mere administrative powers of management, investment, and custody of my estate. The powers granted are to be exercised in a fiduciary capacity for my benefit and (except for the provision of reasonable compensation for services) not for the personal benefit of my attorney-in-fact.

I REVOKE ALL PRIOR GRANTS OF POWER OF ATTORNEY.

IN WITNESS OF MICE, Tropersioned Any pame this 23rd day of May, 1991.

This Document is the property of the Lake County Recorder!

MARY AL PEARCE

STATE OF INDIANA)
)SS
COUNTY OF LAKE)

I also certify that I am of legal age and that I witnessed the appointment by the grantor, in paragraph 15, of the attorney-infact as the grantor's health care representative as authorized by I.C. 16-8-12.

WITNESS my hand and notorial seal this 23 day of May, 1991.

My Commission Expires:

Äugust 12, 1991

Dolores Crabb, Notary Public

THIS INSTRUMENT PREPARED BY: James W. Martin, 1000 E. 80th Place, Suite 521 North, Merrillville, Indiana 46410, Attorney at Law.