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.

DUBOUGE

POWER OF ATTORNEY

OF ,	
DAVID R. FORD	
(GRANTOR)	
то	
SUSAN TRAPP	100
(ATTORNEY-IN-FACT)	
The undersigned hereby nominates, constitutes and appointsSusan Trapp	<u> </u>
ose address is 1321 South Indiana Avenue, Crown Point, Indiana ny true and lawful attorney-in-fact to do and perform for me and in my name the fo	a 46307 flowing:
[Strike any paragraph not applicable]	
and to deposit into such accounts, or into accounts now existing or hereafter eschecks, notes, drafts, acceptances or other evidences of indebtedness payable to not being limited to, checks or drafts issued by the Treasurer of the United States Government or by the Treasurer or other official, bureau, department of agency of any State, municipality or other withdraw or receive from such accounts, all or any part of the balance therein and to sign such documents as may be required in connection with deposit into checks, withdrawals, drafts, receipts or other documents as they be required in withdrawal from or receipt of such accounts; and (d) to have access to and to contained or held in the following safety deposit box: Box No. 125 located	or belonging to me, including by states or any other official, burea similar official of any state, or argovernment body; and to disburs to make such endorsement of any of such accounts; (c) to sign connection with disbursements remove any or all of my proper
First National Bank of East Chicago Crown Point	(BRANCH)
and in any and all other safety deposit boxes in my name either individually or join (2) Motor Vehicles — To sell, lease, maintain, insure, license and re-license an or in which I may have an interest and to execute and deliver any instruments requi (3) Tax Matters — (a) To prepare, execute and till for my behalf income at amount determined due; (b) to prepare, execute and till for my behalf income at amount determined due; (b) to prepare, execute and till for my behalf income at amount determined due; (b) to prepare, execute and till for my behalf documents p property taxes, assessments, and applications for exemptions and (c) to action it may be necessary to negotiate, compronise and settle lax disputes, including assessments and taxes due. (4) Conduct of Business — (a) To manage my property and to conduct my limited to, leasing, managing and maintaining any variant personal property which and hold possession of any real estate, monies, goods, chattels, debts, or any an interest; and (c) to pay, discharge or compromise any of my debts or other obligations but not limited to, stocks, bonds, notes, and other securities or evidence and on such terms as my attorney-in-fact may determine; (b) to vote any such or by proxy; and (c) to receive dividends and other distributions on such securities. (6) Transfer of Interest in Real Estate — To sell, convey, lease, grant an optic fer, for such consideration and upon such terms as my attorney-in-fact shall defor conditional sale, and also to execute and deliver any deed, sales agreement, lease, in such manner and form as may be necessary or required for my attorney-inmy interest in the following described real estate: [Strike (a) or (b).]	ny motor vehicle which I may ownired so to do, and other tax returns and pay ar pertaining to real estate and person my behalf in tax matters whe appealing determinations of valuabusiness affairs, including but nother thing in which I may own; (b) to recover, obtato the thing in which I may have ations. The or otherwise dispose of, securities of indebtedness, all at such prich securities in my name, in person to purchase, or otherwise transeem advisable, including a contrate, contract and any other documents.
(a) Any and all real estate in which I now hold, or may hereafter acquire [or]	e, an interest.
(b) Only the real estate commonly-known as	

FEB 11 1992

auxil n. anton

(7) Other powers specifically designated: To provide for my medical care and to procure, engage and to execute any and all documents incidental thereto; medical providers include, but are not limited to, physicians, surgeons, anesthesiologists, hospitals and clinics, and dentists. IN FURTHERANCE OF THESE POWERS-I give my attorney-in-fact power and authority-to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of this instrument. as fully as I could do personally for myself, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument. 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. If protective proceedings for my person and/or estate shall be commenced, I hereby nominate Susan Trapp _ as Guardian(s) of my person and Susan Trapp __ as Guardian(s) or Conservator(s), as the case may be, of my estate, to serve without bond to the full extent permitted by law. The following named banks, savings and loan associations, investment firms, and/or other persons, firms or corporations listed below may rely onethis instrument being in effect and unrevoked by me unless I shall have executed a proper instrument of revocation and delivered it, or caused it to be delivered, to such person, firm or corporation: Holding Institution
First National Bank of East Chicago Type of Account Account Number Checking 750 283 1 All other persons, firms and corporations to whom this instrument may be delivered may rely on its being in effect and unrevoked by me unless I shall have executed a proper instrument of evocation and recorded it, or caused it to be recorded, in the Office of the Record State of Indiana. STRIKING ALL INAPPLICABLE PROVISIONS: SELECT ONLY ONE OF THE FOLLOWING PROVISIO A. This Power of Actorney that house affected by my tubequent disability or or apacity, 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. This Power of Attorney shall automatically terminate and become null and void on-, but shall not be affected by my disability or incapacity prior to such date. This Power of Attorney shall not be affected by lapse of time, but shall automatically terminate and become null and void upon my disability or incapacity This Power of Attorney shall automatically terminate and become null and void on _ (DATE) 10 C Signed this which shall be considered an original; Counterpart No. ___1 URITYNUMBER 9619 Prairie Avenue, Apartment 2 Highland, Indiana 46322 GRANTOR'S ADDRESS STATE OF INDIANA COUNTY OF LAKE Before me, the undersigned, a Notary Public in and for said County and State, this _ Daylectee, 1992, personally appeared the Grantor named above, and acknowledged the execution of this Power of Attorney to be the voluntary act and deed of the Grantor, for the uses and purposes therein stated. IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above written. LU ANNE LAMBKA NOTARY PUBLIC STATE OF THE PARK LAKE COUNTY HY COMMISSION EXP. MAR. 8 1005 Resident Of: My Commission Expires: . This instrument prepared by <u>David E. Braatz</u> _, Attorney at Law. 1920 North Main Street

P. O. Box 875

Crown Point, Indiana 46307

COPYRIGHT THE ALLEN COUNTY INDIANA BAR ASSOCIATION, INC. (REV. JAN. 1986)