

Power of Attorney

HO462568 LD

92072674

Know All Men by These Presents, That PAMELA K. MICHEL

have made, constituted and appointed, and by these presents do make, constitute and appoint GENE R. MICHEL true and lawful Attorney for HER and in HER name, place and stead

TO SIGN ALL DOCUMENTS, DEEDS, AGREEMENTS, CLOSING STATEMENTS, ASSIGNMENTS, AND AUTHORIZATIONS IN CONNECTION WITH THE SALE OF THE PROPERTY LOCATED AT 1814 ORIOLE DRIVE, MUNSTER, INDIANA, LEGALLY DESCRIBED AS:

LOT 52, FAIRMEADOW SIXTH ADDITION, BLOCK TWO, TO THE TOWN OF MUNSTER, AS SHOWN IN PLAT BOOK 39, PAGE 27, IN LAKE COUNTY, IN. THE DESCRIPTIVE LANGUAGE OF INDIANA CODE 30-5-5-2 IS HEREBY INCORPORATED HEREIN BY REFERENCE.

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OCT 30 1992

Anna N. Antos
AUDITOR LAKE COUNTY

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RECORDING CLERK

NOV 19 1 46 PM '92

giving and granting unto GENE R. MICHEL said Attorney full power to do every act necessary to be done about the premises as fully as SHE might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that GENE R. MICHEL said Attorney, or HIS substitute shall lawfully do or cause to be done by virtue thereof.

In Witness Whereof, The said PAMELA K. MICHEL has hereunto set HER hand and seal this 28th day of OCTOBER 1992

Signed, sealed and delivered in presence of

Elaine L. Mosca
Elaine L. Mosca

Pamela K. Michel (SEAL)
Pamela K. Michel

(SEAL)

(SEAL)

This instrument prepared by: PAMELA K. MICHEL

01987

Chicago Title Insurance Company

STATE OF INDIANA
LAKE COUNTY

STATE OF INDIANA, LAKE County, ss:

Before me, the undersigned, a Notary Public in and for said County, this
28th day of OCTOBER, 1992, came

PAMELA K. MICHEL
.....
....., and acknowledged the execution of the foregoing instrument.

Witness my hand and official seal.

Virginia M. O'Connell Notary Public.
Virginia M. O'Connell
Res. of Lake

My Commission expires 5-13-94



POWER OF ATTORNEY

FROM

TO

Received for record this.....
day of....., 19.....
at.....o'clock m., and recorded
.....Record,
No..... Page.....
Recorder County.

Fee, \$