93016358

Patricia Lewis 1021 Siever L St. Porter, IN 463041

DURABLE GENERAL POWER OF ATTORNEY

AND APPOINTMENT OF HEALTH CARE REPRESENTATIVE

GIVEN BY

MARY CONNERS

Pic Di

්

I, Mary Conners, do hereby make, constitute and appoint Patricla Lewis, my true and lawful Attorney and my health care representative (hereinafter sometimes referred to in the singular as "my Attorney") and in my mamer place and stead, to exercise all or any of the following powers, upon such terms and conditions as my Attorney, in her sole discretion, deems appropriate.

- 1. Authority to Manage and Sell. To manage, control, lease, mortgage, encumber, transfer, sell, convey, exchange or otherwise dispose of any or all property or interest or estate in property to which I am now or may hereafter become entitled, regardless, of the nature of such property, whether real, personal or mixed and regardless of the character or extent of my interest or estate therein, and for the purpose of the foregoing to execute, acknowledge and dediventing my enome paytyndiall instruments of conveyance, deeds of trust, or assignments in such form and with such warranties and covenants as my Attorney, in his sole discretion, deems appropriate;
- 2. Authority to Contract. To contract, agree for, purchase, receive and take any property or interest or estate in property, whether real, personal or mixed, and to accept possession of the same;
- 3. Options and Elections. To grant, sell, transfer, exchange, purchase, acquire or exercise any option, election, privilege or power in respect of any property, whether real, personal or mixed;
- 4. Vote: To vote any stocks, bonus or other securities, and to exercise any other election or power which I may now or hereafter have in respect of the organization, dissolution or management of any corporation, and to delegate the power to so vote by proxies or otherwise;
- 5. <u>Securities.</u> To sell any of my property, whether real or personal or mixed and to deliver any stock, securities, bond, deed or obligation;
- 6. <u>Borrowing and Lending.</u> To borrow money and to make loans of money;
- 7. <u>Authority to Sign Documents.</u> To sign, seal, execute, deliver and acknowledge deeds, leases, mortgages, security agreements, financing statements, hypothecations, bills, bonds, notes, contracts, agreements, receipts, evidences of debts, releases and satisfaction

of deeds of trust or mortgages, judgments and other debts and such other instruments in writing of whatever kind and nature;

- 8. Safe Deposit Boxes. To enter and have access to any safe deposit box to which I am entitled to access, and to place therein or remove therefrom any property or documents;
- 9. Bank Accounts. To deposit in my name and for my account, in any banking institution, building and loan association, savings and loan association, or credit union or credit association, all monies, bills or exchange, drafts, checks, promissory notes, and other securities for money payable or belonging to me, and for that purpose to sign my name and endorse the same for deposit or collection, and from time to time to withdraw any and all monies deposited with any of the foregoing, and for that purpose to draw checks or sign other instruments in my name;
- 10: Sign Checks. To sign in my name any check, draft, note or other negotiable of non-negotiable commercial instrument which I might lawfully sign in person, whether as maker, drawer or endorser;
- 11. Tax Returns. To prepare, sign and rie returns of property or income or other returns of property or whatever, and to make any other agreements or sign any other instruments with any taxing authority whatever;
- 12. Collection. To ask, demand, sue for, recover, collect and receive all sums of money debts, dues, accounts, legacies, bequests, interest, dividends, annuities, employee benefits, insurance benefits and demands whatever as are now or shall hereafter become due, owing, payable or belonging to me and to have, use and take all lawful ways and means in my name or otherwise for the recovery thereof, by long proceedings, or otherwise, and to compromise, adjust, activate, defend, abandon or otherwise deal with and settle claims in connection therewith to give full discharges and releases from the same;
- 13. Employment of Assistants, To employ and compensate agents, attorneys, accountants, brokers, attorneys-in-fact, attorneys-at-law, tax specialists, rear oslate brokers, licensed salesmen and other assistants and advisors.
- 14. Establish Trusts. To establish trusts for my benefit; and
- other acts and things in relation to all or any part of any interest in my property, estate, affairs or business of any kind of description as I myself might or could do if acting personally. I further provide that Patricia Lewis shall be deemed my health care representative according to applicable Indiana State law or the laws of any other state in which I shall be in at the time.

Patricia Lewis shall make such determinations regarding the full extent of any medical care I shall receive as a result of any incapacity I may suffer, including, but not limited to the withholding of extraordinary means to prolong my life If my chances of recovery are poor (applicable Indiana law as it related to Living Wills is hereby made a part of this Agreement by reference).

PROVIDED FURTHER:

- 16. <u>Compensation.</u> My Attorney, Patricia Lewis, shall be entitled to reasonable compensation for services rendered.
- 17. Limitation of Authority. Any authority granted to my Attorney, Patricia Lewis; shall be limited so as to prevent this power of attorney from causing my Attorney to be taxed on my income and from causing my Attorney to be treated as having a general power of appointment (as Charlern Carleined in Section 2041 of the Internal Revenue Code) over any part or all of my estate.

 18. Ratification. I hereby ratify and confirm all that my Attorney,
- 18. Ratification. I hereby ratify and confirm all that my Attorney, Patricial lewis shattmaxially deconcerns to be done by virtue of this power of attorney and the rights and powers granted herein.
- 19. Indemnification. I hereby bind myself to indemnify my Attorney, Patricia Lewis, against any and all claims, demands, losses, damages, actions and causes of action, including expenses, costs and reasonable attorney's fees which my Attorney, at any time may sustain or incur in connection with carrying out the authority granted my Attorney by this power of attorney.
- Revocation. This power of attorney may be revoked, only by my written revocation entered of record in the offices of the County Clerks of Porter and Lake Counties, Indiana or any other county in which this document is filed. Any such revocation must be signed and acknowledge before a Notary Public or other similar official authorized to administer ouths.
- 21. Successors. Should my Attorney be unable or unwilling to serve then I designate that Patricia Lewis shall appoint a successor, to serve in his stead. Such successor shall have all the benefits, powers, duties, discretion, and immunities provided to Patricia Lewis by this power of attorney.
- 22. Reliance. My death or disability shall not revoke or terminate this agency as to the attorney. Any action taken by the Attorney, unless otherwise invalid or unenforceable, shall be binding upon me and my heirs, devisees, and personal representatives. An affidavit executed by my Attorney, Patricia Lewis, or any successor appointed by Patricia Lewis, in the manner provided for in this power of attorney, stating that my Attorney did not have,

at the time of doing an act pursuant to this power of attorney actual knowledge of the revocation or termination of this power of attorney, is, in the absence of fraud, conclusive proof of the nonrevocation or termination of the power of that time.

- 23. Copies. This instrument may be filed of record in any one or more counties within and without the State of Indiana or elsewhere as may be deemed appropriate by my Attorney, and copies of this instrument, certified as true or exact copies by the County Clerk of any of said counties, shall be treated as original copies for all purposes.
- 24. Captions. All titles, headings, and captions used herein have been included for convenience of reference only and shall not be deemed to define or limit these provisions or to affect in any way the construction or application of these provisions.
- Triggering terms. The terms of this power of attorney shall become effective immediately and is mean to be both for my convenience and agency, whether I am residing in Florida, Indiana or any other state, territory of the United States or foreign Sovereign. FURTHER, THIS POWER OF ATTORNEY SHALL REMAIN EFFECTIVE SUPPORTED ABILITY OF MARY CONNERS, and shall continue in full force and effect not withstanding such disability or incapacity and shall remain effective after my death, to the full permissible legal extent under applicable federal and state laws.
- 26. No Duty to Act. My Attorney shall not be liable for failing to exercise any of the authority given my Attorney by this power of attorney unless such failure shall be the result of willful misconduct.

Signed	this _	day of	_/na	Mah	, 19	993 before	the
person named	below	, as witness;	who has	Cally witr	nessed my	signing of	this
instrument in	Your (4) counterpa	aris, each	of which	shall be	considered	an
original.				OE .			

Counterpart No.

Mary Conners Grantor

Grantor's Social Security Number

Acceptance by Pairica Lewis

, Witness

STATE OF INDIANA SS:

BEFORE ME, the undersigned, a Notary Public in and for said County, and State, on this date personally appeared Mary Conners, known to me to be the person whose name is subscribed to the foregoing General Power of Attorney and acknowledged to me that she executed it for the purposes therein specified.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this 11 day of MCLL 12, 1992.

Notary Public Porter County Result

My Commission Expires:

NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

SIOP