1. I, BURTON FIELDON, of Lake County, State of Indiana, being more than 18 years of age and mentally competent, do hereby designate LINDA JOYCE! ROBERTSON; of Lake County, State of Indiana, as my true and lawful attorney-in-fact. It is my explicit intention that this Power of Attorney shall not be affected by subsequent disability or incapacity of myself as the principal.

2. The above named attorney in fact shall have all powers allowed under Indiana Law, specifically including, but not limited to those enumerated at IC 30-2-11-1 et. seq. The following are examples of those powers which my attorney-in-fact shall possess:

a. To: make and crecute any and als contracts;

b. To consent to necessary medical treatment;

c. This Paccess to tany this largest deposit boxes in my name and to openhed spece Cinventor Replace ettems into, or remove from the safe deposit box;

transfer the title to any motor. d. To execute documents to vehicle owned by me;

e. To purchase, assign, maintain, borrow against, liquidate, change beneficiaries and generally deal in all forms of insurance and claims thereon;

f. To purchase, sell, mortgage, convey and lease any interest real e real estate, wherever located, of which I may be owner now or

g. To receive and to demand all sums of money, debts, dues, APR 021993 g. To receive and dividends which may become due or payable to me, and to settle or discharge the same;

h. To sell, purchase, dispose of, assign and pledge any U. S. AUDITOR LAKE COUNTY Savings Bond and U. S. Treasury Securities in which I may have an interest:

- i. To represent me in all matters relating to taxation, whether by the Federal government, the government of any state or any local government unit, and to prepare, sign and file any documents or forms that may be required in these matters;
- j. To bargain for, contract for, buy or sell, or in any other manner deal with personal property of any kind*or nature and to apply or make use of my property for my support and those persons to whom I owe an obligation of support;

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k. To make, draw and indorse promissory notes, checks, or bills of exchange, and to waive demand, presentment, notice of protest, and notice of non-payment of all such instruments;

and I hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof.

- 3. This Durable Power of Attorney shall become effective on the day of , 1988, and shall not be affected by my subsequent disability or incompetence.
- 4. I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until I have executed and recorded in the Recorder's Office of Lake County, Indiana, a written revocation hereof.
- 5. I, further agree to idemnify and hold harmless any person who, in good faith, acts wheet this power of Attorney or transacts business with my Attorney-in-Pact in reliance upon this Power, without actual knowledge of its revocation.
- the Lake County Recorder!

 6. In the event judicial proceedings are brought to establish a guardianship over my person or property; I hereby appoint LINDA JOYCE ROBERTSON to serve as guardian.

IN WITNESSIWHEREOF, I have hereunto set my hand and seal this 15th day of Sept 1988.

Bus Fieldon

STATE OF INDIANA)

) 'SS

COUNTY OF LAKE

Before me, a Notary Public in and for Lake County, Indiana, personally appeared BURTON FIELDON, who acknowledged the execution of the foregoing General Durable Power of Attorney.

WITNESS my hand and Notarial seal this 15 day

SUZANNE C. THIELE - Notary Public

Commission Expires 3/25/92

My Commission Expires!

County of Residence - Lake:

This Instrument was prepared by August E. Hawkins, Attorney at Law.