

94000801

POWER OF ATTORNEY

H 472371 LD (2)

also known as Zelma F. Razzini
KNOW ALL MEN BY THESE PRESENTS, that I, ZELMA R. RAZZINI, of Hammond;

Lake County, Indiana, have made, constituted and appointed; and by these presents do
make, constitute and appoint my son, KENNETH A. RITCHIE, of Schererville, Lake County,
Indiana; as my true and lawful Attorney-in-Fact, or if he is unable to act for any reason, my
daughter-in-law, MAUREEN E. RITCHIE, shall so act as successor, for me and in my name,
place and stead to do all or any of the following acts:

To place documents of property or remove same from any deposit box I may have;

To sign any check or negotiable instrument made out to me, including U.S.
Government checks, and deposit same in any or all of my bank accounts and to
make withdrawals from said accounts in my name;

To sign checks drawn upon my checking account with my name in order to pay my
bills or make purchases on my behalf;

To purchase, sell, dispose of, assign and pledge notes, stocks, bonds and other securities;

To execute instruments to effect the transfer of title to any motor vehicle owned by
me;

To purchase, sell, mortgage, convey and lease any interest in real estate, wherever
located, of which I may be the owner now or hereafter;

To execute and file all tax returns of any kind or nature whatsoever, whether the
same be required by the United States of America, any political subdivision thereof
or any foreign government, and to pay such taxes;

To make and complete gifts of my property or assets to any one or more of my lineal
descendants in such amounts and manner, including outright or in trust, as to qualify
for the present interest annual exclusion from taxable gifts under Section 2503 of the
Internal Revenue Code of 1986, as amended;

To transfer assets or property or property interests which are titled in my name to the
Trustee or Trustees of any revocable trust created by me during my lifetime to be
held, administered, managed, and distributed pursuant to the terms of such
revocable trust;

To apply for Letters of Guardianship for and on my behalf and to act as my Guardian
in connection with any matter or matters which for any reason require a guardianship
or protective proceeding;

I hereby authorize my said Attorney to perform any other act on my behalf which,
due to my inability, I cannot perform myself, and I specifically exempt him from any
personal liability so long as he shall use that degree of care which reasonable
people would use with their own property;

Lot 5, Block 1, E. H. Lewis' Grand Park Subdivision in the City of
Hammond, as shown in Plat Book 24, page 78, in Lake County, Indiana.



JUN 10 AM '91
STATE RECORDER
LAKE COUNTY INDIANA

Anna M. Anton

Chicago Title Insurance Company
STATE INDIANA, S. HD.
LAKE COUNTY
FILED FOR RECORD

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I further exempt any financial institution which relies upon this Power of Attorney, from any liability to me, other than its ordinary legal liability when dealing directly with me; and,

I hereby declare that any act or thing lawfully done hereunder by my said Attorney, shall be binding upon myself, and my heirs, legal and personal representatives, and assigns whether the same shall have been done before or after my death, or other revocation of this instrument unless and until reliable intelligence or notice thereof shall have been received by my said Attorney and by the person, firm or corporation dealing with my Attorney, pursuant to the powers herein granted; no person, firm or corporation need inquire into any action of or authority assumed by the successor Attorney-in-Fact hereunder.

Giving and granting unto my said Attorney full power to do every act necessary to be done as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said Attorney shall lawfully do or cause to be done by virtue thereof.

This Power of Attorney shall not be affected by subsequent disability or incapacity of the principal, or lapse of the ~~My Attorney-in-Fact~~ shall be fully protected and free from any liability for payment application, or accumulation made, or other action taken in reliance upon the powers herein granted.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this, the 17th day of September, 1993.

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)



Zelma R. Razzini
ZELMA R. RAZZINI also known as
Zelma F. Razzini

Before me, the undersigned, a Notary Public, in and for said County and State, personally appeared the within named, ZELMA R. RAZZINI, aka Zelma F. Razzini, who acknowledged the execution of the foregoing Power of Attorney to be her voluntary act and deed.

WITNESS MY HAND AND SEAL this 17th day of September, 1993.

My Commission Expires:
12/25/94

Rosemary L. Gabrys
Rosemary L. Gabrys - Notary Public
Resident of Lake County

THIS INSTRUMENT PREPARED BY:
John F. Hilbrich, Esq.
HILBRICH, CUNNINGHAM & SCHWERD
2637 - 45th Street
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