DURABLE POWER OF ATTORNEY

OF

JANET GRANACK (Grantor)

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TO

THOMAS C. GRANACK, SR. (Attorney-in-Fact)

The undersigned hereby nominates, constitutes and appoints THOMAS C. GRANACK, SR. whose address is 128 Beverly Place, Munster, Indiana 46321, as my true and lawful attorney-in-fact to do and perform for me and in my name the following:

- (1) Banking and Financial Transactions -- (a) To open accounts, in my name or on my behalf, in any bank or trust company, savings and loan company, insurance company, credit union, or any other banking or savings institution, and to deposit into such accounts, or into accounts now existing or hereafter established in my name, any money, checks, notes, drafts, acceptances or other evidences of indebtedness payable to or belonging to me, including but not being limited to checks or drafts issued by the Treasurer of the United States or any other official, bureau, department or agency of the United States Government or by the Treasurer or similar official of any state, or any other official, bureau, department or agency of any State, municipality or other government body; and to disburse, withdraw or receive from such accounts, all or any part of the balance therein; (b) to make such endorsements and to sign such documents as may be required in connection with deposit into any of such accounts; (c) to sign checks, withdrawals, drafts receipts or other documents as may be required in connection with disbursement or withdrawal from or receipt of such accounts; and (d) to have access to and to remove any or all of my property contained or held in any safety deposit box.
- Note and Mortgage -- To execute a note in the amount of One Hundred and Eighteen Thousand Dollars (\$118,000.00) in favor of Citizens Federal Savings and Loan Association and execute a mortgage securing said debt on Lot 15, Block 3, Broadmoor in the Town of Munster.
- (3) Motor Vehicles--To sell, lease, maintain, insure, license and re-license any motor vehicle which I may own or in which I may have an interest and to execute and deliver any instruments required so to do.
- (4) Tax Matters--(a) To prepare, execute and file on my behalf income and other tax returns and pay any amount determined due; (b) to prepare, execute and file on my behalf documents pertaining to real estate and personal property taxes, assessments, and applications for exemptions; and (c) to act on my behalf in tax

Broadmoor, in the town of Munster, as shown Page 3, in Lake County, Indiana. က်ထ္ Lot 15, in Plat

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matters where it may be necessary to negotiate, compromise and settle tax disputes, including appealing determinations of value assessments and taxes due.

- (5) Conduct of Business--(a) To manage my property and to conduct my business affairs, including, but not limited to, leasing, managing and maintaining any real or personal property which I may own; (b) to recover, obtain and hold possession of any real estate, monies, goods, chattels, debts, or any other thing in which I may have an interest; and (c) to pay, discharge or compromise any of my debts or other obligations.
- (6) Securities Transactions--(a) To purchase or otherwise acquire, to sell or otherwise dispose of, securities including, but not limited to, stocks, bonds, notes, and other securities or evidences of indebtedness, all at such price and on such terms as my attorney-in-fact may determine; (b) to vote any such securities in my name, in person or by proxy; and (c) to receive dividends and other distributions on such securities.
- (7) Transfer of Interest in Real Estate-To sell, convey, lease, grant an option to purchase, or otherwise transfer, for such consideration and upon such terms as my attorney-in-fact shall deem advisable, including a contract for conditional sale, and also to execute and deliver any deed, sales agreement, lease, contract and any other document(s) in such manner and form as may be necessary or required for my attorney-in-fact to transfer all or any part of any real estate which I now hold, or may hereinafter acquire, an interest.
- (8) Health Care--(a) To employ or contract with servants, companions or health care providers to care for me; (b) to consent to or refuse health care for me; (c) to admit or release me from a hospital or health care facility; (d) to have access to records including medical records concerning my condition; (e) to make plans for the disposition of my body.

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.

Persons to whom this instrument may be delivered may rely on its being in effect and unrevoked unless I shall have executed a proper instrument of revocation and recorded it, or caused it to be recorded, in the Miscellaneous Records of Lake County, State of Indiana. This Power shall not be affected by my subsequent disability or incapacity, 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.

Signed this 10th day of March, 1994; before the person named below, as witness, who has duly witnessed my signing of this instrument in two counterparts, each of which shall be considered an original. Counterpart No.

340-30-7952

GRANTOR'S SOCIAL SECURITY NUMBER

128 Beverly Place, Munster, IN 46321

GRANTOR'S ADDRESS

Document is the property of

SIGNING BY GRANTOR unty Recorder!

STATE OF INDIANA)

COUNTY OF LAKE

Before me, the undersigned, a Notary Public in and for said County and State, this 10th day of Manh, 1994, personally appeared the Grantor named above, and acknowledged the execution of the above instrument to be her voluntary act and deed, 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.

MY COMMISSION EXPIRES:

RESIDENT OF:

605-94 Lake County, IN

The attorney-in-fact represents and warrants that within his knowledge this power is unrevoked and is still in full force and effect upon each and every exercise of the powers herein granted. Thomas & Tround &

THOMAS C. GRANACK, SR., ATTORNEY-IN-FACT

This instrument prepared by WILLIAM A. O'ROURKE, Attorney at Law, 5231 Hohman Ave., Suite 501, Hammond, Indiana 46320.