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THIS FORM HAS BEEN APPROVED BY THE INDIANA STATE BAR ASSOCIATION FOR USE BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTION OF SPECIAL CLAUSES, CONSTITUTES THE PRACTICE OF LAW AND MAY ONLY BE DONE BY A LAWYER.

RETURN TO:
FIRST AMERICAN TITLE INS. CO
5265 COMMERCE DR., SUITE 1
CROWN POINT. IN 46307

POWER OF ATTORNEY

OF

APR 20 1994

AUDITOR LAKE COUNTY

RUBY JOHNSON (GRANTOR)

TO

SANDRA KINTZEL AMES
(ATTORNEY-IN-FACT)

The undersigned hereby nominates, constitutes and appoints Sandra Kintzel Ames
whose address is 207 Island Drive, Lowell, Indiana

as my true and lawful attorney-in-fact to do and perform for me and in my name the following:

[Strike any paragraph not applicable]

(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 the following safety deposit box: Box No. ________located at:

| - | (INS) | HU | HON) | | | , | | | | BRAN | CH) | | |
|-------|-------|----|------|------|-----|------|------|--|------|------|-----|------|------|
| | | | | | | | | | | | | | |
| | | | | | (A) | MAIL | 1221 | | | | _ | | |

and in any and all other safety deposit boxes in my name either individually or jointly with any other person.

- (2) 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.
- (3) 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 (e) to act on my behalf in tax matters where it may be necessary to negotiate, compromise and settle tax disputes, including appealing determinations of value assessments and taxes due.
- (4) 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.
- (5) Securities Transactions (a) To purchase or otherwise acquire and 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.
- (6) 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 my interest in the following described real estate: [Strike (a) or (b).]
 - (a) Any and all real estate in which I now hold, or may hereafter acquire, an interest.

[or] C.

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H. A.

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| (7) (2) | |
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| (7) Other powers specifically designated: | - |
| <pre>medical procedure, test or even if this might hasten m medical advice.</pre> | erning health care for me, e or withhold consent to any treatment, including surgery, ny death or be against conventional we my attorney-in-fact power and authority to do for me and |
| in my name those things which such attorney deems expe | edient to and necessary to effectuate the intent of this instrument, anto myself, however, the power to act on my own behalf and |
| Any act or thing lawfully done by my attorney-in- heirs, assigns and legal representatives. | fact under this instrument shall be binding on me and on my |
| If protective proceedings for my person and/or estate Sandra Kintzel Ames | as Guardian(s) of my person and as Guardian(s) or Conservator(s), |
| as the case may be, of my estate, to serve without bond to The following named banks, savings and loan associati | the full extent permitted by law. ions, investment firms, and/or other persons, firms or corporations t and unrevoked by me unless I shall have executed a proper |
| Holding Institution | Type of Account Account Number |
| | |
| | |
| | s instrument may be delivered may rely on its being in effect oper instrument of revocation and recorded it, or caused it to County, State of Indiana. |
| A This Power of Attorney shall not be affected in them; my intention that this instrument constitute a Power of Attorney Act. **SEXXMENTAL XMHORX MINISTRATION OF ACT. **SEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | жхххххххххххххххххххххххххххххххххххх |
|] | 1104 Beacon Street, East Chicago, Indiana 46312 GRANTOR'S ADDRESS |
| STATE OF INDIANA) SS: | |
| COUNTY OF (1) Reference, the undersigned, a Notary Public in and for | or said County and State, thisday of |
| Power of Attorney to be the voluntary act and deed of the | he Grantor named above, and acknowledged the execution of this |
| IN WITNESS WHEREOF I have hereunto set my h | and and official seal the day and year last above written. |
| | 91 1/- (I) |
| | NOTARY PUBLIC |
| My Commission Princes 2/13/92 | Resident Of: Lake County. |
| This instrument prepared by Gilbert F. Black | mun, 9006 Indianapolis Blvd Attorney at Law. Highland, Indiana 46322 |