

*First National Bank
14 Indiana Ave., Calpa*

Durable General Power of Attorney



ANASA G. COLBY
CHIEF DEP. RECORDER

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

95 JUN 17 AM 10:30

I, KAREN J. MACMULLIN

Name of Person Granting Power

whose address is 454 Limestone Dr., Bethel Park, PA

15102

Address of Person Granting Power

do hereby nominate, constitute and appoint Karen J. MacMullin, (Attorney)

Karen J. MacMullin

Name of Person Appointed

whose address is 454 Limestone Dr., Bethel Park, PA

454 Limestone Dr., Bethel Park, PA

Address of Person Appointed

NOT OFFICIAL!
This Document is the property of
the Lake County Recorder!

my true and lawful attorney-in-fact, with full power of substitution, to act in my name, place and stead, to do and perform any act that I might legally perform through an attorney-in-fact or that I myself might lawfully perform if I were personally present.

By this Power of Attorney, I hereby revoke any general power of attorney that I have heretofore given to any person. I specifically exclude from the term "general power of attorney" any Living Will, Advance Directive with Proxy for Health Care, Limited Power of Attorney for Health Care or similar document.

Except as provided in any Living Will, Advance Directive with Proxy for Health Care, Limited Power of Attorney for Health Care or similar document which I have executed, my Attorney is hereby given the fullest possible powers to act on my behalf: to transact business and make, execute and acknowledge all writings, agreements and instruments for any matter.

Without limiting the general powers granted herein in any way, the general powers granted herein include, but are not limited to the following specific powers, which shall be construed and implemented in accordance with 20 Pa. C.S.A. § 5601 et. seq. as such shall be in effect on the date this Power of Attorney is executed:

1. Power to make limited gifts.
2. Power to create a trust for my benefit.
3. Power to make additions to an existing trust or trusts for my benefit.
4. Power to claim an elective share of the estate of my deceased spouse.
5. Power to disclaim any interest in property.
6. Power to renounce fiduciary positions.
7. Power to withdraw and receive the income or corpus of a trust.
8. Power to engage in real property transactions.
9. Power to engage in tangible personal property transactions.
10. Power to engage in stock, bond and other securities transactions.
11. Power to engage in commodity and option transactions.
12. Power to engage in banking and financial transactions.

Handwritten signature

TICOR TITLE INSURANCE
Crown Point, Indiana
191061

- 13. Power to borrow money.
- 14. Power to enter safe deposit boxes.
- 15. Power to engage in insurance transactions.
- 16. Power to engage in retirement plan transactions.
- 17. Power to handle interests in estates and trusts.
- 18. Power to pursue claims and litigation.
- 19. Power to receive government benefits.
- 20. Power to pursue tax matters.

My Attorney shall have the power to do all other things which the Attorney shall deem necessary and proper in order to carry out the foregoing powers. It is my intent, and I do hereby direct, that this Power of Attorney shall not be terminated or otherwise affected by my subsequent disability or incapacity. I hereby ratify all acts done by my Attorney pursuant to this Power of Attorney.

This Power of Attorney shall not expire by reason of lapse of time.

This Power of Attorney shall be revoked by my giving to the Attorney written notice of revocation, which shall not be considered binding unless it is actually received. Any banking institution may rely on the continuance of this Power of Attorney until it receives written notice of its revocation. Subject to 20 Pa. C.S.A. §5608, any person who is given instructions by my Attorney in accordance with this Power of Attorney shall comply with the instructions. Any person who acts in good faith reliance on this Power of Attorney shall incur no liability as a result of acting in accordance with the Attorney's instructions.

(Strike out and initial if not desired.)

In the event proceedings are deemed necessary for the protection of my estate, and are initiated, I hereby nominate Robert W. MacMullin Name of Person Appointed my above named Attorney as the guardian of my estate.

Executed this 28 day of December, 1994

WITNESSES:

[Signature]



KAREN J. MACMULLIN
[Signature]

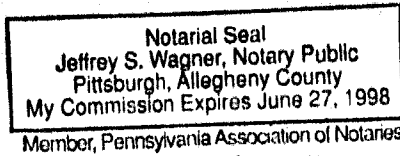
KAREN J. MACMULLIN

(Typed Name of Person Granting Power)

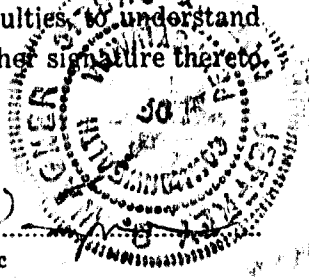
Commonwealth of Pennsylvania } ss.
County of Allegheny

On this 28th day of December, 1994, before me, the undersigned officer, personally appeared Karen J. MacMullin, known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument, who acknowledged that he or she executed the same for the purposes therein contained. Upon personal observation, she appeared to be lucid, in control of his or her faculties, to understand the nature of the within instrument, and to be acting voluntarily in affixing his or her signature thereto.

IN WITNESS WHEREOF, I hereunto set my name and official seal.



[Signature]
Notary Public



This instrument was prepared by Karen J. MacMullin