

SENT BY: Xerox Telecopier 7020 ; 10-20-94 ; 2:41PM ;

STATE OF INDIANA
LAKE COUNTY
FILED #194850548-1D

C P480702
2197633511;# 8

95052553

95 SEP -7 AM 10: 29

MARSHALL COUNTY
RECORDER

①

LIMITED POWER OF ATTORNEY (REAL ESTATE)

We, Marianne G. Gurnitea, Lake County, State
of Indiana, being at least 18 years of age and mentally competent, do hereby designate
Donna L. Spivey **Document is** of Lake County, State of
Indiana, as my true and lawful attorney-in-fact.

I. POWERS AND PURPOSES

The above named attorney-in-fact shall have authority with respect to real property transactions pursuant to Ind. Code §30-5-5-2, pertaining to the transaction real estate described below, situated in Lake County, State of Indiana:

*To handle all contracts in the sale of
4544 Central, LAKE STATION*

REAL ESTATE COMMONLY KNOWN AS: lots 13 and 14, Block 7, Elliot's Park, in the City of Lake Station, as shown in Plat Book 21 page 36, in Lake County, Indiana.

Key 19-108-13 & 14



the address of such real estate is commonly known as 4544 Central Ave
Lake Station, La. (the "Real Estate") and shall be construed so as to effectuate this purpose. This authority shall include, by way of illustration and not limitation, the power:

FILED

SEP 6 1995

SAM ORLICH
AUDITOR LAKE COUNTY

Chicago Title Insurance Company

13-10
CT

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

To make and execute any and all contracts pertaining to the Real Estate;

To receive and to demand all sums of money, debts, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to compromise, settle or discharge the same;

To bargain for, contract concerning, buy, sell, encumber and in any way and manner, deal with personal property located upon or pertaining to the Real Estate; and,

To execute any and all documentation necessary to effectuate the transactions described above, including, but not limited to, closing statements, instruments of conveyance and supporting documentation, certifications, acknowledgements, and like instruments.

II. EFFECTIVE DATE AND TERMINATION

A. This power of attorney shall be effective: *(select appropriate provision)*

as of the date it is signed

as of the _____ day of _____, 19__.

upon the determination that I am disabled or incapacitated, or no longer capable of managing my affairs prudently. My disability or incapacity, for this purpose, may be established by the certificate of a qualified physician stating that I am unable to manage my affairs.

B. My disability or incompetence *(select appropriate provision)* (shall) *(shall not)* affect or terminate this Power of Attorney.

C. This power of attorney shall terminate: *(select appropriate provision)*

upon my incapacity

upon the _____ day of _____, 19__

upon the execution and recordation with the Recorder's Office of the County where the Real Estate is located a written revocation hereof.

III. RATIFICATION AND INDEMNIFICATION

I/We hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof. Further, I/We agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-in-fact in reliance upon this Power, without actual knowledge of its revocation.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand(s) and seal(s) this 7 day of July, 1995.

Duane G. Yuraitis

Printed: Duane G. Yuraitis

Donna L. Harris

Printed: Donna L. Harris

STATE OF INDIANA)

COUNTY OF Porter)

SS:

Before me, a Notary Public in and for said County and State, personally appeared Duane Yuraitis and Donna Harris who acknowledged the execution of the foregoing Power of Attorney, and who, having been duly sworn, stated that any representations therein contained are true.

WITNESS my hand and Notarial seal, this 7th day of July, 1995.

Printed: Patricia Aguirre, Notary Public

My Commission Expires:

02-26-96

My County of Residence:

Porter

This instrument was prepared by Duane G. Yuraitis

