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GENERAL DURABLE POWER OF ATTORNEY

RECORDER

ARTICLE I

Known All Men by These Presents, that I, ADALINE KOARTGE, a resident of Lake County, Indiana, have made, constituted and appointed and by these presents do make, constitute and appoint my sister EVELYNE CHARITON, of Lake County, Indiana, as my true and lawful Attorney in Fact for me and in my name to,

(a) Ask, demand, sue for and recover, collect and receive all money, deposits, accounts, interest, dividends and any other credits of whatsoever kind or nature as are now or hereafter shall become due, owing or payable to me and to make, execute and deliver acquittances, receipts, releases, or other discharges therefor;

(b) Settle, adjust or compromise any and all claims, accounts, or debts, owing to or by me and to take or deliver all necessary and proper releases therefor;

(c) Grant, bargain, sell, exchange, lease, mortgage or otherwise convey any part or all of the real estate or personal property now owned or hereafter acquired by me or to which I now have or may in the future acquire any interest, whether legal or equitable, and in my name to make, execute, acknowledge and deliver good and sufficient deeds, leases, deeds of trust, bills of sale, mortgages or other conveyances of the same;

(d) Deposit, draw checks, invest, or withdraw funds in any bank or financial institution in which I have assets, and to endorse checks payable to me or my account, including U.S. Treasury checks for Social Security, income tax, Medicare, interest, dividends, or other checks of any nature;

(e) To invest and reinvest funds in any amount in any financial institution, and to use my funds for the purpose of paying bills for doctors, nurses, hospital care, convalescent home care, ambulance charges, taxes, insurance premiums, utility bills, and for any and all other debts which I may owe;

(f) Deposit money or securities to my account or for collection with any financial institution and to sign or endorse any instrument to effect such deposit and to withdraw money or securities from any financial institution and to sign or endorse any instrument to effect such withdrawals;

(g) To enter any safe deposit box in any institution, to sign any and all documents for such purpose, to remove the contents from said box, and to renew or cancel said box at any time;

(h) To enforce my rights or to protect my property, including the institution, prosecution, compromise and settlement of legal proceedings in my name or otherwise, and to file any proof of debt or take any other proceedings under the bankruptcy act or under any law of any state or territory of the United States, in connection with any such claim, debt, money or demand, and, in any such proceeding or proceedings, to vote in the election of any trustee or assignee, and to demand, receive, and accept any dividend or dividends or distributions that may be or become payable therein or thereon;

(i) Pay any and all taxes, including income taxes, charges and assessments that may be assessed, imposed or levied by any governmental agency and in this connection to make and execute all income tax returns or other tax forms or returns;

(j) File any proof of debt or take any other proceedings under the Bankruptcy Act or under any law of any state or territory of the United States, in connection with any such claim, debt, money or demand, and, in any such proceeding or proceedings, to vote in the election of any trustee, or assignee or assignees, and to demand, receive and accept any dividend or dividends or

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distribution or distributions that may be or become payable therein or thereunder;

(k) Execute vouchers in my behalf for any and all allowances and reimbursements properly payable to me by the United States, including, but not restricted to allowances and reimbursements for transportation of dependents or for shipment of household effects as authorized by law and regulations; and to receive, endorse, and collect the proceeds of checks payable to the undersigned or to her order drawn on the Treasury of the United States;

(l) Take possession, and order the removal and shipment, of any of my property from any post, station, warehouse, depot, dock, or other place of storage or safe-keeping, governmental or private; and to execute and deliver any release, or other instrument necessary or convenient for such purpose;

(m) Engage in, do and transact all and every kind of business in which I am or may hereafter be interested in such manner as he or she may think proper;

(n) To do and perform any act and thing whatsoever requisite and necessary or proper to be done in all matters affecting my business or property, and with the same force and effect as though I were personally present and acting for myself.

ARTICLE II

My Attorney in Fact is authorized in his or her sole and absolute discretion from time to time and at any time to exercise the authority described below relating to matters involving my health and medical care. In exercising the authority granted to my Attorney in Fact herein, my Attorney in Fact is instructed to try to discuss with me the specifics of any proposed decision regarding my medical care and treatment if I am able to communicate in any manner, even by blinking my eyes. Accordingly, my Attorney in Fact is authorized as follows:

(a) To request, receive and review any information, verbal or written, regarding my personal affairs or my physical or mental health, including medical and hospital records, and to execute any releases or other documents that may be required in order to obtain such information, and to disclose such information to such persons, organizations, firms or corporations as my Attorney in Fact shall deem appropriate.

(b) To employ and discharge medical personnel and health care providers including, but not limited to, psychiatrists, dentists, nurses, and therapists as my Attorney in Fact shall deem necessary for my physical, mental and emotional well-being, and to pay them, or any of them, reasonable compensation.

(c) To arrange for my hospitalization, convalescent care, hospice or home care; to summon paramedics or other emergency medical personnel and to seek emergency treatment for me, as my Attorney in Fact shall deem appropriate; My Attorney in Fact must try to discuss these decisions with me. However, if I am unable to communicate, my Attorney in Fact may make such decisions for me, after consultation with my physician or physicians and other relevant health care givers. To the extent appropriate, my Attorney in Fact may also discuss this decision with my family and others to the extent they are available. However, any decision made by my Attorney in Fact, pursuant to this paragraph, shall not supersede the decision made by my Health Care Representative if one is even appointed.

(d) To the fullest extent possible, under the law of this State, to consent to and arrange for the administration of pain-relieving drugs of any kind, or other surgical or medical procedures calculated to relieve pain even though their use may lead to permanent physical damage, addiction or even hasten the moment of (but not intentionally cause) my death; to authorize,

