THIS PORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW WHICH SHOULD ONLY BE DONE BY A LAWYER.

POWER	OF ATTOF	RNEY	960
	OF		22
	RT J. GALINSKI	, ,	6 6
P	RINCIPAL		-
	TO		
	RIS GALINSKI RNEY IN FACT		
made under Ind amended, or	iana Code 30-5, as it i replaced (the "Statut	nay be e")	z 19
I, as principal, designate and name the pers	_		e my attorney in fæt. 🝃
A. Powers. According to the Statute, an atterney incorporates the power. Therefore, by recover of Attorney incorporates into it the powers real property transactions; ***********************************	ferring to the language here listed and conference with the language with the langua	ge of the Status general authors www.xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	ite describing powers, tubority with respect to them: [IC 30-5型型] XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Note: Though the Statute grants powers we delegation [IC 30-5-5-18], this Power of Attorney depower of attorney concerning health care.] Any power I do not wish to incorporate into my initials opposite the deletion. Any power to be have verified by writing my initials in the space	XXXXXXXXXXXXXXXX with respect to health loes not include them. this Power of Attorne be modified or added	care [IC 30-5- Health care ca y I have delete I have modifie	5-16 and IC 30-5-5-17] and in be provided in a separate d by lining out and writing
NONE			
	SEAL		
IN FURTHERANCE OF THESE POWERS, me and in my name those things which such attor this Power of Attorney, as fully as I could do for B. Reservation of Power to Act and to Fown behalf and also to revoke or amend this Power to C. Chapters of Statute Also Applicable.	ney deems expedient t myself. Revoke. I reserve unto wer of Attorney.	o and necessar	ever, the power to act on my
Attorney and acts performed under it:	THE following emapses		
Definitions [IC 30-5-2] General Provisions [IC 30-5-3] Duties [IC 30-5-6]		Liab	ance [IC 30-5-8] vilities [IC 30-5-9] nination [IC 30-5-10]
D. Liability of Attorney in Fact. As perm attorney in fact is liable only if my attorney in f	itted by IC 30-5-9-5, I act acts in bad faith.		
E. Reliance on Power of Attorney. In holding institution(s) named in this Paragraph E this Power of Attorney being in effect unless I sh and delivered such instrument, or caused it to b	addition to provision and the banking inst hall have executed a p	itution named roper instrum	in Paragraph r may tely on
Holding Institution	Type of A		Account Number
NONE			
All other persons to whom this Power of At shall have executed a proper instrument revokin recorded, in the Office of the Recorder ofI	g or changing it and re	ecoraea sucn 11	nstrument, or caused it will

· -	ox. I have a safe deposit box	, Number NON	2
(BANKING INSTITUTION)	(BRANCH)	(CITY)
either individually or joir property to it, and to relo addition to those incorpo	ntly with any other person. I ocate such box within the b rated into this Power of Att	give the power also to anking institution o orney by reference.	any other safe deposit box in my name o remove property from such box or add r at another. Powers here given are in
G. Duration of PostriKING ALL INAPPI	wer of Attorney. SELEC LICABLE PROVISIONS: [in	T ONLY ONE OF T case of insufficient	THE FOLLOWING PROVISIONS BY striking, provision a applies]:
b. This Power of A	XXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	at Noon (TIME)
KYDOONKOGOOCKXX XXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXWXXXXXXXXXXXXXXX	**************************************
date of this Power of Atto attorney. In case of failur	rney. Revocation does not a re to strike, prior powers are	Tect the validity of a revoked.	powers of attorney I signed before the n act performed under a prior power of
I. Guardians. If p	rotective proceedings for m	y person or for my	estate, or for both, are commenced, I
nominate None	, to serve in each case with	dian of my person, a	end
			ney in fact I designate and name
None	Such succe	ssor shall become m	y attorney in fact when the person(s) in the Statute, or has/have declined to
During a period of my in authorized to act under the successor or selected by	capacity, my attorney in fact his Power of Attorney, wheth a court of competent jurisdi	shall continue to se ner designated and n ction to be such suc	
K. Binding Effect	. Any act or thing performed interest, as the Statute pro	d by my attorney in f ovides.	act under this Power of Attorney binds
	day of April		, 199_96_, in counterparts,
each of which shall be co	nsidered an original.		
Counterpart No.		9733 Park	AL'S STREET OR OTHER ADDRESS
	1010	WDIANA HILL	ALS CITY, STATE AND ZIP CODE
STATE OF INDIANA) SS.	/	
COUNTY OF LAKE)	,	
day of April	lged the execution of it, as t	peared the principa	y and State, this9th al named above, signed this Power of deed of the principal, for the uses and
IN WITNESS WHE	REOF, I have hereunto set n	ny/hand and officials	eal the day and year last above written
	-	toman-	1 Old In The Indian
		TAMMY D. D	OTARY PUBLIC'S SIGNATURE
	m F 00	NOTARY F	UBLIC'S NAME, PRINTED OR TYPED
My Commission Expires	s: <u>/-5-98</u>	Resident of	The state of the s
This instrument prepare	ed by I. Alexander	Woloshansky	, Attorney at Law
•	-> 506 . 8. 84	THOUSE.	