THIS FORM HAS BEEN PREPARED FOR USE WITHIN THE STATE OF INDIANA. 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 AND SHOULD ONLY BE DONE BY A LAWYER.

POWER OF ATTORNEY

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made under Indiana Code 30-5, as it may be amended, or replaced (the "Statute")

I, as principal, designate and name the person whose name appears above to be my attorney in fact.

A. Powers. According to the Statute, an attorney in fact has a power granted under IC 30-5 if the power of attorney incorporates the power. Therefore, by referring to the language of the Statute describing powers, this Power of Attorney incorporates into it the powers here listed and confers general authority with respect to them.

real property transactions;	IIC 30-5-5-2
tangible personal property transactions;	
bond, share, and commodity transactions;	(IC 30-5-50) & &
banking transactions; / Document is	110 20 5 5 151
business operating transactions:	IC 30-5-5
insurance transactions:	IC 30-5-5-7 🖰 😘
beneficiary transactions: This Document is the property of	병하는 살이 된다면 이렇게 살아보았습니다. 그러워 하는 경험에 없을까지 모르겠다. 생각하나 하는데 다
gift transactions; / This Document is the property of	IC 30-5-5-8
fiduciary transactions; the Lake County Recorder!	[IC 30-5-5-10]
claims and litigation;	IC 30-5-5-11
family maintenance;	[IC 30-5-5-12]
benefits from military service;	[IC 30-5-5-13]
records, reports, and statements;	[IC 30-5-5-14]
estate transactions;	[IC 30-5-5-15]
all other matters.	[IC 30-5-5-19]
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[Note: Though the Statute grants powers with respect to health care [IC 30-5-5-16] and IC 30-5-5-17] and delegation [IC 30-5-5-18], this Power of Attorney does not include them. Health care can be provided in a separate power of attorney concerning health care.]

Any power I do not wish to incorporate into this Power of Attorney I have deleted by lining out and writing my initials opposite the deletion. Any power to be modified or added I have modified or added as follows: [and have verified by writing my initials in the space provided here in the margin].

N/A N/A

IN FURTHERANCE OF THESE POWERS, I give my attorney in fact power to act on my behalf and to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of this Power of Attorney, as fully as I could do for myself.

- B. Reservation of Power to Act and to Revoke. I reserve unto myself, however, the power to act on my own behalf and also to revoke or amend this Power of Attorney.
- C. Chapters of Statute Also Applicable. The following chapters of the Statute also apply to this Power of Attorney and acts performed under it:

Definitions [IC 30-5-2] General Provisions [IC 30-5-3] Duties [IC 30-5-6] Reliance [IC 30-5-8] Liabilities [IC 30-5-9] Termination [IC 30-5-10]

- D. Liability of Attorney in Fact. As permitted by IC 30-5-9-5, I, as principal, specifically provide that my attorney in fact is liable only if my attorney in fact acts in bad faith.
- E. Reliance on Power of Attorney. In addition to provisions of the Statute regarding reliance, the holding institution(s) named in this Paragraph E and the banking institution named in Paragraph F may rely on this Power of Attorney being in effect unless I shall have executed a proper instrument revoking or changing it and delivered such instrument, or caused it to be delivered, to such person(s):

	Holding Institution		Type of Accou	nt	Account Nu	nber
Merc	antile National Bank		2 checking acc	<u>ounts</u>	2375192	
Merc	antile National Bank		checking		2375109	
Tako	Federal Savings & L	oan	savings		47854-3	

All other persons to whom this Power of Attorney may be delivered may rely on its being in effect unless I shall have executed a proper instrument revoking or changing it and recorded such instrument, or caused it to be recorded, in the Office of the Recorder of ______ County, State of Indiana.

11.00 K.S. CK#<u>45637</u>

F. Safe Deposit Bo	ox. I have a safe deposit bo	ox, Number	ng ting ting ting ting ting ting ting ti	·
at(BANKING INSTITUTION		(BRANCH)		(CITY)
either individually or join property to it, and to relo	power to enter or have accutly with any other person. ocate such box within the rated into this Power of A	I give the power also to a banking institution or	remove property from	such box or add
	ower of Attorney, SELE LICABLE PROVISIONS: [i			
	ttorney is not terminated ttorney terminates on	by my incapacity.	at	ME
c. This Power of A	ttorney terminates upon 7	ny incapacity or on	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	IVIC)
H. Revocation of I	Prior Powers. I do/ do not rney. Revocation does not a re to strike, prior powers a	affect the validity of an		
nominate <u>Gail É</u>	rotective proceedings for a Malker as gua to serve in each case with	ardian of my person, ar	nd Gail E. Wa	e commenced, I lker
***	orney in Fact. As a su			nata and nama
o, Duccessor 7100		essor shall become my		
first designated and nam	ed has/have failed or cease	d to serve as specified i	n the Statute, or has/	have declined to
During a period of my inc authorized to act under the successor or selected by a K. Binding Effect me and my successors in Signed this 20 each of which shall be co	•	ct shall continue to serve ther designated and nare liction to be such succe ed by my attorney in factorides.	ve until a successor at med in this Power of A ssor. ct under this Power of	ttorney in fact is Attorney as such
Counterpart No3		Hurred	Refaces	> <u> </u>
			312-09-6584	
		PRINCIPAL	L'S SOCIAL SECURITY NUMB	ER
		6634 Tanglewo	ood Drive, Apt.	<u>1D</u>
			Indiana 46323	E 5 5
			L'S CITY, STATE AND ZIP COI	DE
STATE OF INDIANA)	NDIANA CULTURE		
COUNTY OF) SS.	The state of the s		
	ersigned, a Notary Public	in and for said County	and State this	21
day ofMay	, 199 6 , personally a ged the execution of it, as	appeared the principal	named above, signe	ed this Power of
IN WITNESS WHE	REOF, I have hereunto set		/ / / /	st above written.
		•	ARY PUBLIC'S SIGNATURE	
		Larry P.	STASS'S BLIC'S NAME, PRINTED OR T	VDCD.
My Commission Evniros	10/18/96	Resident of	Lake	County
	d by			
· •		The Allen County Ind	liana Bar Association, Inc.	. (Printed Feb. 1992)
This in	strument prepared by	: Larry D. Stass:	in /	
une au	remerre brehated by	Sachs & Hess, I	P.C. /	
		5832 Hohman Ave Hammond, IN 46		

Mail to: Sachs & Hess, P.C., 5832 Hohman Ave., Hammond, IN 46320

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