

3 FILED

JUN 04 1997

SPECIAL POWER OF ATTORNEY

SAM ORLICH residing at 4101 W. 216th Street, Matteson, Illinois 60443, hereby appoint
AUDITOR of LAKE COUNTY of 21603 Jeffrey, Sauk Village, Illinois 60411, as my Attorney-in-Fact
("Agent").

My Agent shall have full power and authority to act on my behalf but only to the extent permitted
by this Special Power of Attorney. My Agent's powers shall include the power to:

- 1. Sell or convey any interest of mine in real estate located at:
ALV (old) 1057 N. Lakeview Dr.
Lowell, Indiana
and legally described on the attached Exhibit.

This power shall include the power to (i) sell upon such terms as my Agent shall deem
appropriate, subject to the limitations (if any) stated above, (ii) sign any documents (including
deeds) that may be required to convey title to such property, and (iii) collect and receive the
proceeds from any such sale.

I hereby grant to my Agent the full right, power, and authority to do every act, deed, and thing
necessary or advisable to be done regarding the above powers, as fully as I could do if personally
present and acting.

Any power or authority granted to my Agent under this document shall be limited to the extent
necessary to prevent this Power of Attorney from causing (i) my income to be taxable to my
Agent, (ii) my assets to be subject to a general power of appointment by my Agent, and (iii) my
Agent to have any incidents of ownership with respect to any life insurance policies that I may
own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good
faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith
while acting under the authority of this Power of Attorney.

I authorize my agent to indemnify and hold harmless any third party who accepts and acts under
this document.

My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any
services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable
expenses incurred in connection with this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent, if
I so request or if such a request is made by any authorized personal representative or fiduciary
acting on my behalf.

This Power of Attorney shall become effective immediately, and shall not be affected by my
disability or lack of mental competence. This Power of Attorney shall continue effective until
June 6, 1997. This Power of Attorney may be revoked by me at any time by providing written
notice to my Agent.

③ FA20122 HOLD FOR FIRST AMERICAN TITLE

97035668

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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

000271

1400
FA
SW

Mary Vis

Mary Vis

State/Commonwealth of Illinois
County/City of Cute

This instrument was acknowledged before me on this 27 day of May, 1997 by
Mary Vis.

Kathlyn M King

Notary Public

OFFICIAL SEAL
KATHLYN M KING
NOTARY PUBLIC STATE OF ILLINOIS
MY COMMISSION EXP. OCT. 18, 1997

Title (and Rank)

My commission expires Oct 18, 1997

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

STOP

Prepared by Attorney Phillip Casey



Property That Can Be Sold

Lots 9 & 14, Block 20, Dalelaria, Lowell, Indiana

