E.Chicago Titic Insurance Company

+ 5.T 02 1997 97066821 SAM ORLICH AUDITOR LAKE COUNTY

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

97 OCT -3 AM 10: 16

MORRIS W. CARTER RECORDER

Du	rabl	e Power	r of A	ttorney
----	------	---------	--------	---------

do make, constitute and appoint BARBARA A BANE

executing of all or any of the following acts, deeds, and things:

I (We EDWARD A BANE

494/93

Key 13-105-11 of 311 Lake Street Schererville, IN 46375 of 311 Lake Street Schererville, IN 46375 my (our) true and lawful attorney, to act in, manage, and conduct all my (our) estate and all my (our) affairs, in my (our) name, place and stead as my (our) act and deed, either to do and execute, or to concur with persons jointly interested with me (us) in the doing or

To borrow money on such terms as my (our) attorney may choose.

To purchase, sell, lease, convey, assign, pledge, hypothecate, mortgage and warrant, or otherwise deal with any or all real or personal property in which I (we) may have an interest, for such purposes and upon such terms and in such form as my (our) attorney may choose, including, but not limited to, property located in the _____TOWN OF SCHERERVILLE LAKE County, State of INDIANA described as:

311 LAKE STREET SCHERERVILLE, IN 46375 Commonly known as: ___

Tax Identification Number: including all lands and interests therein contiguous or appurtenant to land owned or claimed by me (us), whether or not specifically described above.

To make, execute, acknowledge and deliver under seal or otherwise any contract, agreement, bond, note, mortgage, deed of trust, deed, assignment, pledge, security agreement, power, guaranty, application for credit, application for insurance, statement, tax form, affidavit, disclosure, consent, amendment, election, vote, waiver, escrow agreement, endorsement, certification, promise, receipt, acknowledgment, instruction, order form, commitment, accounting, notification, letter, rider, addendum, authorization, appointment, power of attorney, stipulation, disclaimer, accord and satisfaction, settlement statement, settlement agreement, closing statement, closing instruction, disbursement authorization, listing agreement, subordination agreement, release discharge, questionnaire, proprietary certificate, request, document, form required by any federal, state or local law, regulation or ordinance, or other instruments which said attorney may deem necessary;

To make, draw, sign, endorse, accept or otherwise place my (our) name or signature upon any checks, notes, drafts or other instruments;

And to receive and collect and to give acquittances for all sums of money at any time due me (us).

Giving and Granting unto my (our) named attorney full power and authority to do and perform all and every act, deed, matter and thing whatsoever, in and about my (our) estate, property, and affairs as fully and effectually to all intents and purposes as I (we) might or could do in my (our) own proper person if personally present, the above specifically enumerated powers being in aid and exemplification of the full, complete, and general power herein granted and not in limitation or definition thereof; and hereby ratifying all that my (our) said attorney shall lawfully do or cause to be done by virtue of this document.

And I (we) hereby declare that any act or thing lawfully done hereunder by my (our) said attorney shall be binding on me (us) and

NBD 4561 Rev 12/96

Lat 11, Pack Mann 12 th add, PB 31/83

my (our) heirs, conservators, guardians, trustees, legal and personal representative, and assigns, whether the same shall have been done before or after my (our) death, or other revocations of this instrument, unless and until reliable intelligence or notice thereof shall have been received by my (our) said attorney.

This appointment being executed by me (us) shall cover my (our) jointly and severally owned property, property owned by me (us) in the entireties or as community property, and property owned by a trustee for my (our) benefit.

This power of attorney shall expire and terminate on $9-3$	
This power of attorney shall not be affected by my disability (or the	e disability of either or both of us).
In Witness Whereof, I (we) have set my (our) hand and seal this	day of
X m/ miles 10.97	
0	
Witnesses: Colombull La Deford	Signers dward a. Sane
The state of the s	EDWARD A. BANE
Volace Julie	•
STATE OF holeans	and the state of t
) SS.	
County of)	
The foregoing instrument was acknowledged before me this day of	
0	
September 3. C. 1997.	
U	
by EDWARD A. BANE	5 4 1 1
	The same to a the day of the
	Notary Public Clare Lette to Spent
	State of
	State of
	County of
	My Commission Expires: 10-27-9-7
This in turning durified here	When recorded actions to:
This instrument drafted by: Thomas J. Tate (P21275)	When recorded return to:
P.O. Box 331789	FIRST CHICAGO/NBD MORTGAGE COMPANY
Detroit, Michigan 48232-7789	
•	115 S. COURT STREET
(Blank lines completed by:	
NANCY MEMERING	CROWN POINT, INDIANA 46307
Please Type	

22