STATE OF INDIANA LAKE COUNTY POWER OF APPTORNEY

FILED

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97 HARA M. MASCHER
MORRIS (Grantor): A

DEC 19 1997

SAM ORLICH AUDITOR LAKE COUNTY

JANICE HANISKO

TO

(Attorney-in-fact)

The undersigned hereby nominates, constitutes and appoints **JANICE HANISKO**, whose address is 225 West 76th Avenue, Merrillville, Indiana 46410, as my true and lawful attorney-in-fact, to do and perform for me and in my name the following:

- (1) Banking and Financial Transactions (a) To open accounts, in my name or on my behalf, in any bank or trust company, savings and loan company, insurance company, credit union, or nay other banking or savings institution, and to deposit into such accounts, or into accounts now existing or hereafter established in my name, any money, checks, notes, drafts, acceptances or other evidences of indebtedness payable to or belonging to me, including but not being limited to, checks or drafts issued by the Treasurer of the United States or any other official, bureau, department or agency of the United States Government or by the Treasurer or similar official of any state, or any other official, bureau, department or agency of any State, municipality or other government body; and to disburse, withdraw or receive from such accounts, all or any part of the balance therein; (b) to make such endorsements and to sign such documents as may be required in connection with deposit into any of such accounts; (c) to sign checks, withdrawals, drafts, receipts or other documents as may be required in connection with disbursement or withdrawal from or receipt of such accounts; and (d) to have access to and to remove any or all of my property contained or held in any and all other safety deposit boxes in my name either individually or jointly with any other person.
- (2) Motor Vehicles To sell, lease, maintain, insure, license and re-license any motor vehicle which I may own or in which I may have an interest and to execute and deliver any instruments required so to do.
- (3) Tax Matters (a) To prepare, execute and file on my behalf income and other tax returns and pay any amount determined due; (b) to prepare, execute and file on my behalf documents pertaining to real estate and personal property taxes, assessments, and applications for exemptions; and (c) to act on my behalf in tax matters where it may be necessary to negotiate, compromise and settle tax disputes, including appealing determinations of value assessments and taxes due.

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- (4) <u>Conduct of Business</u> (a) To manage my property and to conduct my business affairs, including but not limited to, leasing, managing and maintaining any real or personal property which I may own; (b) to recover, obtain and hold possession of any real estate, monies, goods, chattels, debts, or any other thing in which I may have an interest; and (c) to pay, discharge or compromise any of my debts or other obligations.
- (5) <u>Securities Transactions</u> (a) To purchase or otherwise acquire and to sell or otherwise dispose of, securities, including but not limited to, stocks, bonds, notes, and other securities or evidences of indebtedness, all at such price and on such terms as my attorney-in-fact may determine; (b) to vote any such securities in my name, in person or by proxy; and (c) to receive dividends and other distributions on such securities.
- (6) <u>Transfer of Interest in Real Estate</u> To sell, convey, lease, grant an option to purchase, or otherwise transfer, for such consideration and upon such terms as my attorney-in-fact shall deem advisable, including a contract for conditional sale, and also to execute and deliver any deed, sales agreement, lease, contract and any other document(s) in such manner and form as may be necessary or required for my attorney-in-fact to transfer all or any part of my interest in any and all real estate in which I now hold, or may hereafter acquire, an interest,
- (7) General Authority with respect to Health Care To request and consent to any and all medical care and treatment. I further authorize my attorney-in-fact to make decisions in my best interest concerning implementation and/or withdrawal or withholding of health care or medical treatment.

IN FURTHERANCE OF THESE POWERS I give my attorney-in-fact power and authority to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of this instrument, as fully as I could do personally for myself, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument.

Any act or thing lawfully done by my attorney-in-fact under this instrument shall be binding on me and on my heirs, assigns and legal representatives.

If protective proceedings for my person and/or estate shall be commenced, I hereby nominate JANICE HANISKO as Guardian(s) of my person and JANICE HANISKO as Guardian(s) or Conservator(s), as the case may be, of my estate, to serve without bond to the full extent permitted by law.

All persons, firms and corporations to whom this instrument may be delivered may rely on its being in effect and unrevoked by me unless I shall have executed a proper instrument of revocation and recorded it, or caused it to be recorded, in the Office of the Recorder of Lake County, State of Indiana.

This Power of Attorney shall not be affected by my subsequent disability or incapacity, nor by lapse of time, it being my intention that this instrument constitute a durable power of attorney under the Indiana Uniform Durable Power of Attorney Act.

Signed this 17th day of January, 1996.

CLARA M. MASCHER, Grantor

313-07-1822 Grantor's Social Security No.

6921 Broadway Merrillville, Indiana 46410

STATE OF INDIANA) SS: COUNTY OF LAKE)

Before me, the undersigned, a Notary Public in and for said County and State, this 1741 day of January, 1998, personally appeared the Grantor named above, and acknowledged the execution of this Power of Attorney to be the voluntary act and deed of the Grantor, for the uses and purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above written.

Hanula, M. Poth
Notary Public Pamela M. Roth

My Commission Expires: Harch 16,1996
County of Residence: Lake

This instrument prepared by:

GERALD M. BISHOP, ESQ., Indiana Attorney Number: 2753-45 GRECO PERA BISHOP & VERNIA 2115 W. Lincoln Highway Merrillville, IN 46410 (219) 738-2988