STATE OF LAND 37 1 6 COUNTY OF LAKE)

STATE OF INDIANA
LAKE COUNTY
FULL COUNTY
F

POWER OF ATTORNEY

BY THIS POWER OF ATTORNEY, I, DORA SYLVIA GARCIA, name an Attorney-in-Fact with power to act on my behalf pursuant to Indiana Code Title 30 Article 5 as it exists now and is amended in the future. I hereby revoke any powers of attorney executed by me prior to the date of this Power of Attorney. Indiana Code is hereinafter referred to as "IC".

- 1. As my attorney-in-fact, I name my daughter, VICTORIA G. EULLOQUI, whose address and telephone number as of this date are; 5022 Reading, East Chicago, Indiana and (219) 397-0471.
 - 2. My attorney-in-fact shall only be liable for actions undertaken in bad faith.
 - 3. This Power of Attorney shall be effective as of the date I have signed it.
- 4. I give to my attorney-in-fact, the powers specified in this section to be used on my behalf, PROVIDED that my attorney-in-fact shall not have any power which would cause my attorney-in-fact to be treated as the owner of any interest in my property.

Specifically I give my attorney-in-fact authority with respect to:

Real estate property transactions pursuant to IC 30-5-5-2. This document is intended to allow my above-named Attorney-in-Fact to sign such documents as are necessary to finalize my purchase (together with my husband, Guadalupe Garcia) of the real estate located 1302 W. 151st Street, East Chicago, Indiana. This Power of Attorney does not give said Attorney any ownership interest in said real estate or the proceeds from the sale thereof.

COMMUNITY TITLE COMPANY FILE NO 3 15081

FILED

APR 22 1998

SAM ORLICH

DORA SYLVIA GARCIA A/K/A Dora S. Garcia

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THOMAS D. RYAN ATTORNEY AT LAW 4704 INDIANAPOLIS BLVD EAST CHICAGO, IN 46312 397-4000 5. Without regard to my mental or physical condition, this Power of Attorney shall continue in effect until revoked or until my death, whichever occurs first.

Dated this 30th day of March, 1998. 18

NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

DORA SYLVIA GARCIA Dora S. Garcia

STATE OF INDIANA)

) **SS**:

COUNTY OF LAKE)

The undersigned, a Notary Public, residing in Lake County, Indiana certifies and witnesses that the above-signed, personally known to me to be the same person whose name is subscribed to this instrument, appeared before me in person and acknowledged the signature and delivered the instrument as a free and voluntary act, for the uses and purposes named in the instrument.

Dated: March 30, 1998

Notary Public

NOTARY PUBLIC STATE OF INDIANA
LAKE COUNTY

MY COMMISSION FXP IAN 27 2000

PHOMAS D. RYAN
ATTORNEY AT LAW
4704 INDIANAPOLIS BLVD
EAST CHICAGO, IN 46312
397-4000

FAX 398-2727

THIS INSTRUMENT PREPARED BY ATTORNEY THOMAS D. RYAN