LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, JAMES A. TOMLINS, a legal resident of Lowell, Indiana, have made, constituted and appointed, and by these presents do make, constitute and appoint my wife, CATHY J. TOMLINS, my true and lawful attorney for the limited and specific purpose of refinancing property at 235 Bel-Aire, Lowell, Indiana, 46356, which property is legally described as follows:

Lot 31 in Bel-Aire Estates Unit 3, in Addition to the Town of Lowell, Indiana, as per Plat thereof, recorded August 18, 1971 in Plat Book 41, Page 62, in the Office of the Recorder of Lake County, Indiana,

and for that purpose for me and in my hame, place and stead, and the Lake County Recorder!
for my use and benefit, and as my act and deed, to do and execute, or to concur with persons jointly interested with myself therein in the doing or executing of, all or any of the following acts, deeds and things, that is to say:

- acquire; to sell, convey, mortgage, hypothecate, pledge, quit-claim or otherwise encumber or dispose of; or to contract or agree for the acquisition, disposal or encumbrance of; any property whatsoever, real, personal or mixed, or any custody, possession, interest, or right therein, upon such terms as my attorney shall think property
- 2. To make, endorse, accept, receive, sign, seal, execute, acknowledge and deliver deeds, assignments, agreements, certificates, hypothecations, checks, notes, bonds, vouchers, receipts and such other instruments in writing of whatever kind and nature as may be necessary, convenient or proper in the premises.

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SAM ORLICH
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LAWYERS TITLE INS. CORP. ONE PROFESSIONAL CENTER SUITE 215 CROWN POWT, IN 46307

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of GIVE AND GRASS my attorney full power as authority to do every act whatsoever to effectuate this limited power of attorney as fully to all intents and purposes as if I might or could do in my own proper person if personally present; and I hereby ratify all that my attorney shall lawfully do or cause to be done by virtue of these presents.

I hereby declare that any act or thing lawfully done hereunder by my attorney shall be binding on myself, and on my heirs, legal and personal representatives and assigns, whether the same shall have been done before or after my death, or other revocation of this instrument, unless and until reliable intelligence or notice thereof shall have been received by my attorney.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on

the Lakingsaunty Recorder!

Grantor JAMES A. TOMLINS

STATE OF ALL SSS.

I, the undersigned, a Notary Public residing in and duly authorized in said State and County to administer oaths and take acknowledgments, do hereby certify that JAMES A. TOMLINS ("grantor"), personally known to me to be the same person whose name is subscribed to the foregoing power of attorney, appeared before me this day in person and acknowledged that the grantor signed, sealed and delivered the power of attorney as the grantor's free and voluntary act for the uses and purposes therein set forth.

Given under my hand and notarial seal on May 16 1, 1998

Notary Public

DIANE CARLSON

This power of attorney
was prepared by:
Richard A. Dahl (ARDC Reg. #06201039) of
BARASH & STOERZBACH, P.C.
P. O. Box 1328
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Galesburg, IL 61402-1328
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