

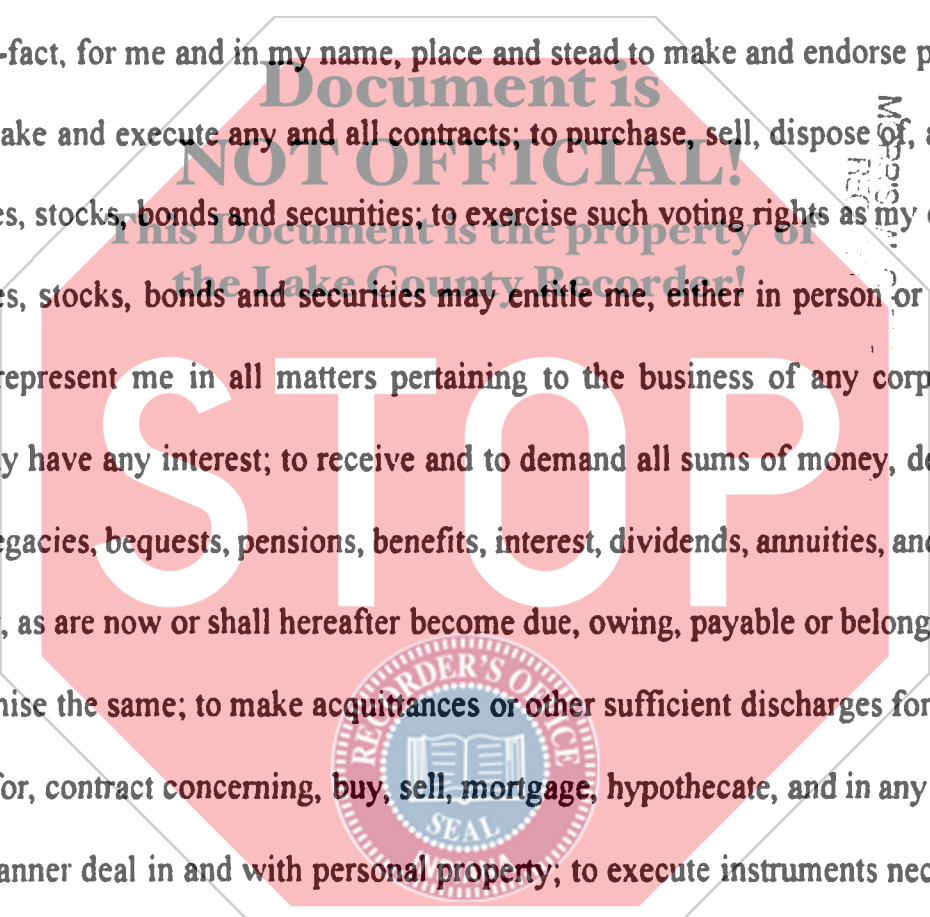
**DURABLE POWER OF ATTORNEY
AND
DESIGNATION OF HEALTHCARE REPRESENTATIVE**

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That I, LOVELL AMISON, of 2080 Taft Street, Gary, Indiana 46404, do hereby make, constitute and appoint my wife, ZELDA AMISON, pursuant to the provisions of Indiana Code 30-5, et seq., as it may be amended or replaced, as my true and lawful attorney-in-fact, for me and in my name, place and stead to make and endorse promissory notes; to make and execute any and all contracts; to purchase, sell, dispose of, assign and pledge notes, stocks, bonds and securities; to exercise such voting rights as my ownership of any notes, stocks, bonds and securities may entitle me, either in person or by proxy

To represent me in all matters pertaining to the business of any corporation in which I may have any interest; to receive and to demand all sums of money, debts, dues, accounts, legacies, bequests, pensions, benefits, interest, dividends, annuities, and demands whatsoever, as are now or shall hereafter become due, owing, payable or belonging to me; to compromise the same; to make acquittances or other sufficient discharges for the same; to bargain for, contract concerning, buy, sell, mortgage, hypothecate, and in any and every way and manner deal in and with personal property; to execute instruments necessary for the transfer of personal property of any kind or nature whatsoever; to execute instruments to effect the transfer of title to any motor vehicle owned by me.

To purchase, sell, mortgage, convey and lease any interest in real estate, wherever located, of which I may be the owner now or hereafter.



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LAKE COUNTY
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CLERK LAKE COUNTY

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To execute and file all tax returns of any kind or nature whatsoever, whether the same be required by the United States of America, any political subdivision thereof or any foreign government, and to pay such taxes; to examine and request copies of any tax returns heretofore or hereafter filed by me or for and in my behalf.

To enter into, examine and remove any items from any safety deposit box in my name, either jointly or individually.

To take all lawful means deemed desirable by my said attorney-in-fact to enforce my rights or to protect my property, including the institution, prosecution, compromise and settlement of legal proceedings, in my name or otherwise.

Generally to transact any and all business for me of any kind or nature whatsoever; to do and perform each and every act and thing whatsoever requisite and necessary or proper to be done in all matters affecting my business or property, and with the same force and effect as though I were personally present and acting for myself.

It is my intent that my attorney-in-fact have all those powers granted under I.C. 30-5 as if set forth herein.

It is my further intent that my attorney-in-fact have the right, power and authority as granted herein or granted under I.C. 30-5 et seq. to convey any interest in real estate, wherever located, of which I may now be the owner, to my attorney-in-fact and myself, at tenants by the entireties; my attorney-in-fact is further authorized to transfer the title to any personal property which I may now own or hereafter acquire into her name and my name as tenants by the entireties.

Pursuant to the provisions of I.C. 16-36-1-7, I authorize my attorney-in-fact to do and perform each and every act and thing whatsoever requisite and necessary or proper to be done in all matters affecting my health and general welfare, as well as to make any and all decisions necessary to provide for any form of medical treatment for my health and general welfare, including herewith all the power to act for me, as my Healthcare Representative with the same force and effect as though I were personally present and acting for myself; and I hereby ratify and confirm all that my said attorney-in-fact shall do by virtue hereof.

To consent to such medical examination, medical procedures and medical treatment as, in the sole judgment of my attorney-in-fact, appears beneficial to me and to withhold consent to any medical examination, medical procedures or medical treatment which, in the sole judgment of my attorney-in-fact, is not beneficial to me.

To consent to my admission to any hospital, infirmary, convalescent facility, nursing facility or other type care facility as, in the sole judgment of my attorney-in-fact, seems proper for my care, treatment or maintenance, and to sign any contracts, agreements, or otherwise, necessary to effect my admission to any such of the foregoing facilities.

To perform every act, deed, matter and thing necessary to provide for my personal care and well being, including, among other things, selection of my abode, employment of companions or practical nurses, purchase or repair of my clothing, travel, recreation, entertainment, funeral and burial arrangements, and spiritual and religious needs, and to

carry out my personal responsibilities, whether legal or moral only, including appropriate provisions for my dependents.

To create, revoke or amend trusts in my name, to make any such trust irrevocable, and to transfer any of my property to the Trustee for administration and disposition in accordance with the provisions of such a Trust or the provisions of any Trust that I may establish. To designate or elect that the income and/or principal of such a trust, or any Trust that I may establish, may be distributed to any one or more persons other than myself.

To create, revoke, or amend any estate plan in my name and to transfer any of my property in order to carry out such estate plan, whether such transfer is made to full value, or for less than full value. To renounce and disclaim any property or interest in property or powers to which for any reason and by any means I may become entitled, whether by gift, testate or intestate succession; to release or abandon any property or interest in property or powers which I may now or hereafter own, including any interests in or right over trusts (including the right to alter, amend, revoke or terminate) and to exercise any right to claim an elective share in any Estate or under any Will.

In exercising such discretion, my attorney-in-fact may take into account such matters as shall include but shall not be limited to any reduction in estate or inheritance taxes on my Estate, and the effect of such renunciation or disclaimer upon persons interested in my Estate and persons who would receive the renounced or disclaimed

property; provided, however that any attorney-in-fact shall make no disclaimer that is expressly prohibited by other provisions of this instrument.

To the extent I am permitted by law to do so, I herewith nominate, constitute and appoint my attorney-in-fact to serve as my guardian, conservator, and/or in any similar representative capacity, and if I am not permitted by law to so nominate, constitute and appoint, then I request in the strongest possible terms that any Court of competent jurisdiction, which may receive and be asked to act upon a Petition by any person to appoint a guardian, conservator or similar representative for me, give the greatest possible weight to this request.

This Durable Power of Attorney shall not be affected by my subsequent disability or incapacity, or lapse of time. If proceedings are ever begun for appointment of a guardian, conservator, or like representative for my person or estate, it is my preference that whoever may then be serving or eligible to serve as my attorney-in-fact under this Durable Power of Attorney be appointed to that office.

The powers granted to my attorney-in-fact pursuant to I.C. 30-5 shall be effective upon the execution of this Durable Power of Attorney.

My subsequent disability or incompetence shall not affect or terminate this Power of Attorney.

The authority granted to my attorney-in-fact as my Healthcare Representative pursuant to I.C. 16-36-1-7 shall be effective upon, and only during, any period of

