

2

Power of Attorney

Know All Men by These Presents, That *Jerry Kovalsky*

have made, constituted and appointed, and by these presents do make, constitute and appoint *Ron Kovalsky* true and lawful Attorney for *Jerry Kovalsky* and in *Jerry Kovalsky* name, place and stead

K# 15-372-7

TICOR TITLE INSURANCE
Crown Point, Indiana

Lot 19 in Lincoln Gardens Fifth Subdivision, as per plat thereof, recorded in Plat Book 35 page 111, in the Office of the Recorder of Lake County, Indiana.



99205096
170

99068566

MORRIS L. CARTER
RECORDER

99 AUG 17 AM 9:03

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

PETER BENJAMIN
LAKE COUNTY AUDITOR

giving and granting unto *Ron Kovalsky* said Attorney full power to do every act necessary to be done about the premises as fully as *he* might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that *Ron Kovalsky* said Attorney, or substitute shall lawfully do or cause to be done by virtue thereof.

In Witness Whereof, The said *Jerry Kovalsky* ha hereunto set hand and seal this *1st* day of *March*, 19*99*

Signed, sealed and delivered in presence of
Jerry Kovalsky (SEAL)
Jerry Kovalsky (SEAL)

(SEAL)

This instrument prepared by: *Jerry Kovalsky*

001131

H/O GALT #99.205096

STATE OF INDIANA, Lake County, ss:

Before me, the undersigned, a Notary Public in and for said County, this 1st day of March, 1999, came

Jerry Kovalsky

and acknowledged the execution of the foregoing instrument.

Witness my hand and official seal.

My Commission Expires:

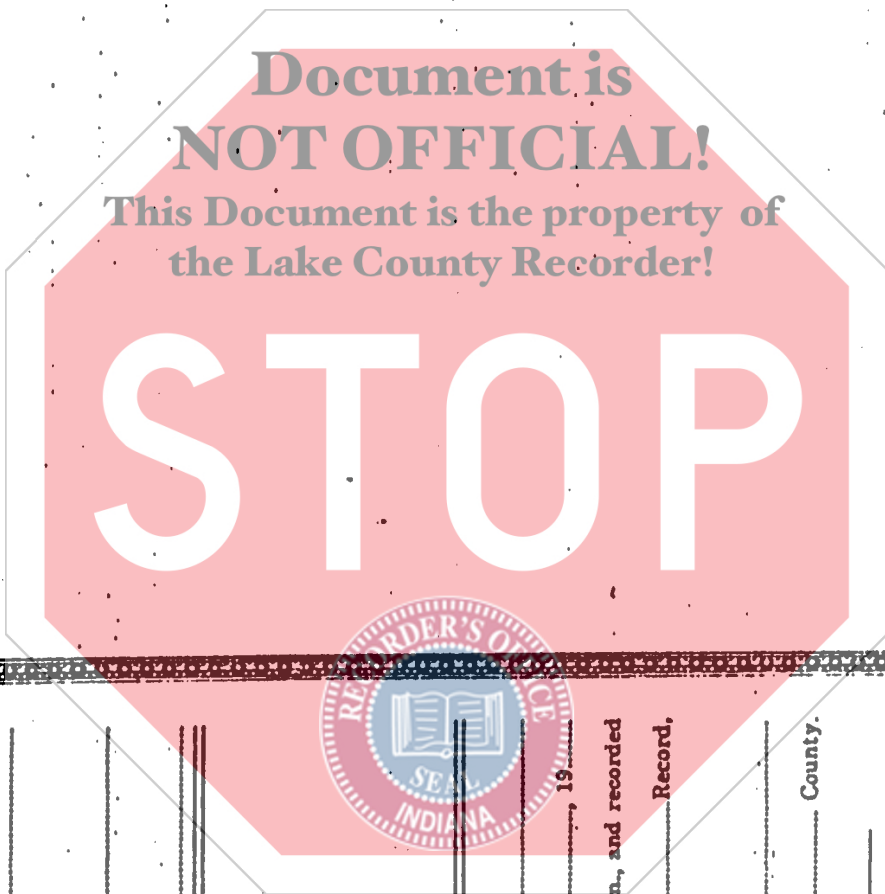
July 26th 2006

Notary Public.

Robin Meacham

My Commission expires

Lake County Resident



POWER OF ATTORNEY

FROM

TO

Received for record this

day of _____, 19____

at _____ o'clock _____ m., and recorded

No. _____ Page _____ Record.

Recorder _____ County.

Fee, \$ _____