I, HELEN I. ECHOLES, of MARION County, Indiana, being at least 18 years of age and mentally competent, do hereby designate and appoint J. BEATRICE AVINGTON as my true and lawful attorney in fact and if she be unable or unwilling to serve, I designate and appoint, GORDON R. BELL, of GARY, w Indiana, as my true and lawful attorney in fact.

POWERS I give to my attorney-in-fact the powers herein specified to be used on my behalf. I am incorporating by reference herein those powers which comply with my wishes in U accordance with the manner prescribed by Indiana Code Subsection 30-5-5. The powers given herein shall be considered limited so 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 and which would cause that property to be taxed as owned by the attorney in fact. attorney-in-fact, it being my intention not to grant any beneficial interests in my estate by this construmenty. My attorney-in-fact shall have the following powers:

Real Property. Authority with respect to real property transactions pursuant to Indiana Code Subsection 30-5-5

Authority with respect to: Tangible Personal Property. tangible personal property pursuant to Indiana-Code Subsection 30-5-5-3.

Bonds, Commodities and Shares. Authority with respect to bonds, commodities and shares pursuant to Indiana Code Subsection 30-5-5-4, and to generally sell, exchange or otherwise deal with same as such attorneyin-fact shall determine.

with respect to Banking. Authority transactions pursuant to Indiana Code Subsection 30-5-5-5, including right to make such gifts or distributions as he shall determine for and on my behalf.

Business. Authority with respect to business transactions pursuant to Indiana Subsection 30-5-5-6.

Insurance. Authority with respect to insurance, transactions pursuant to Indiana Code Subsection 30-527 5-7 providing that references in Indiana Code Subsection 30-5-5-7(a)(2) and (3) to "Section 8 This authority shall not section 9". This authority shall not section 9". This authority shall not section 4". The peneficiary of any policy insuring my life to any natural person. This authority shall include full power to apply for and otherwise deal with medicare and medicaid benefits.

Beneficiary. Authority with respect to beneficiary

001848

9

transactions pursuant to Indiana Code Subsection 30-5-5-8.

<u>Fiduciary.</u> Authority with respect to fiduciary transactions pursuant to Indiana Code Subsection 30-5-5-10.

Claims and Litigation. Authority with respect to claims and litigation pursuant to Indiana Code Subsection 30-5-5-11.

Family Maintenance. Authority with respect to family maintenance pursuant to Indiana Code Subsection 30-5-5-12.

Military Service Benefits. Authority with respect to benefits from military service pursuant to Indiana Code Subsection 30-5-5-13, including the full power to apply for benefits from and otherwise deal with matters concerning the Veterans Administration.

Records, Reports and Statements. Authority with respect to records, reports and statements pursuant to Indiana code Subsection 30-5-5-14; including the power to execute on my behalf any specific power of attorney required by any taxing authority which is needed to allow my attorney-in-fact to act on my behalf before that taxing authority on any return or issue.

Estate Transactions. Authority with respect to estate transactions pursuant to Indiana Code Subsection 30-5-5-15.

Delegate. Authority with respect to delegating authority pursuant to Indiana Code Subsection 30-5-5-18.

All Other Matters. Authority with respect to all other matters pursuant to Indiana Code Subsection 30-5-5-19. Also all authority to make such decisions concerning the medical and health care to be provided for me in event I am not able to make such decisions for myself.

- II. GUARDIAN If it becomes necessary to secure the appointment of a guardian of my person or estate or if protective proceedings are filed on my behalf, I hereby request the appropriate probate court to appoint J. BEATRICE AVINGTON as Guardian to act on my behalf and if she be unable or unwilling to serve, then I appoint GORDON R. BELL to act on my behalf.
- III. <u>FEES</u> My attorney-in-fact shall be entitled to a fee for services provided as my attorney-in-fact.
- IV. LIABILITY AND INDEMNITY My attorney-in-fact shall only be liable for actions undertaken in bad faith; provided, however, my attorney-in-fact shall be liable for the

Z

(

negligent exercise of the powers described herein if the exercise of such power involves self-dealing. I hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof. Further, I agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-infact in reliance upon this Power, without actual knowledge of its revocation.

V. EFFECTIVE DATE AND INCAPACITY

- A. This Power of Attorney shall be effective as of the date it is signed.
- B. My disability or incompetence shall not affect or terminate this Power of Attorney.
- C. This Power of Attorney shall terminate upon the execution and recordation with the Recorder's Office of the County of my domicile a written revocation hereof.

VI. REVOCATION

I hereby reserve the right to revoke this power of attorney at any time. My attorney-in-fact shall have the power to revoke all powers of attorney previously executed by me.

17 IN WITNESS WHEREOF, I have hereunto set my hand this day of april, 1998.

Helen - Echoles
HELEN I ECHOLES

HELEN I. ECHOLES

the Lake County Recorder!

STATE OF INDIANA

iss:

COUNTY OF MARION

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared HELEN I. ECHOLES, and acknowledged the execution of the above and foregoing Power of Attorney.

IN WITNESS WHEREOF, I do hereby set my hand and notarial seal as of the 179 day of white, 1998.

Dorothy J. Sonders Donald S NOTARY

PRINTED SIGNATURE

Commission Expires: 5-5-99 County of Residence: Marron

THIS DOCUMENT PREPARED BY CHARLES R. GRAHN, ATTORNEY AT LAW, 11029-49, ONE INDIANA SQUARE, SUITE 2250, INDPLS., IN 46204.

CTIC Has made an accommodation recording of the instrument. We Have made no examination of the instrument or the land affected.

(

negligent exercise of the powers described herein if the exercise of such power involves self-dealing. I hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof. Further, I agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-infact in reliance upon this Power, without actual knowledge of its revocation.

V. EFFECTIVE DATE AND INCAPACITY

- A. This Power of Attorney shall be effective as of the date it is signed.
- B. My disability or incompetence shall not affect or terminate this Power of Attorney.
- C. This Power of Attorney shall terminate upon the execution and recordation with the Recorder's Office of the County of my domicile a written revocation hereof.

VI. REVOCATION

I hereby reserve the right to revoke this power of attorney at any time. My attorney-in-fact shall have the power to revoke all powers of attorney previously executed by me.

179 IN WITNESS WHEREOF, I have hereunto set my hand this day of have, 1998.

HELEN I. ECHOLES

the Lake County Recorder!

STATE OF INDIANA

SS:

COUNTY OF MARION

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared HELEN I. ECMOLES, and acknowledged the execution of the above and foregoing Power of Attorney.

IN WITNESS WHEREOF, I do hereby set my hand and notarial seal as of the 179 day of which, 1998.

Dorothy J. Sanders

PRINTED SIGNATURE

Commission Expires: 5-5-99 County of Residence: Marion

THIS DOCUMENT PREPARED BY CHARLES R. GRAHN, ATTORNEY AT LAW, 11029-49, ONE INDIANA SQUARE, SUITE 2250, INDPLS., IN 46204.

CTIC Has made an accommodation recording of the instrument. We have made no examination of the instrument or the land affected.

2

(

25×1.

. Lot 1 and that part of Lot 2 lying Northwesterly of a straight line extending from a point on the Northeasterly line of said lot which is 15 feet Southeasterly from the Northwest corner thereof to a point on the Southwesterly line of said lot which is 16.54 feet Southeasterly of the Southwest corner thereof in Block 2 in Gary Land Company's Fourth Subdivision, in the City of Gary, as per plat thereof, recorded in Plat Book 14, page 15, in the Office of the Recorder of Lake County, Indiana.

Commonly known as: 2021 M. 8th Avenus, Garry, Indiana 46402



(

25× |