## **POWER OF ATTORNEY**

FILED

KNOW ALL MEN BY THESE PRESENTS, that I, Fredelle H. Berkowitz, of 450 Old Stone 2000 Road, Apartment 2, in the Town of Munster, in the County of Lake, State of Indiana, a citizen of PETER BEN the United States, have made, constituted, and appointed, and by these present to GOALNTY AUDITOR constitute, and appoint my son, David M. Berkowitz, of 1252 W. Illinois Avenue, Palatine, Illinois 60067, my true and lawful attorney-in-fact, for me and in my name, place and stead to ask, demand, sue for, collect and receive all sums of money, dividends, interest, payments on account of debts and legacies and all property now due or which may hereafter become due and owing to me, and give good and valid receipts and disch transfer stocks and bonds and s securities of all kinds in my name and for my account and at such prices as shall seem good to him; to sign, execute, acknowledge and deliver in my name all transfers and assignments of securities; to borrow money and to pledge securities for such loans if in the judgment of my attorney-in-fact such action should be necessary; to consent in my name to reorganizations and mergers, and to the exchange of securities for new securities; to manage real property, to sell convey, and mortgage realty, specifically, but not ilmitted to the real estate legally described as: "Residential Apartment Spit F2 together with an undivided 1.025 per cent interest in the common area and facilities in the Stone Ridge Condominium Horizontal Property Regime in the Town of Municipes, as recorded on June 14, 1978 as Document No. 473673 and in Plat Book 48 pages 102 to 109, both inclusive in the Office of the Recorder of Lake County, Indiana"; to foreclose mortgages and to take title to property in my name if he thinks proper, and to execute, acknowledge, and deliver deeds of real property, mortgages, releases, satisfactions, and other instruments relating to realty which he considers necessary, specifically including, but not limited to the real estate legally

14.00

00270 9

5499

Harahach

PAGE ONE OF A THREE PAGE POWER OF ATTORNEY

described above; to place and effect insurance; to do business with banks, and particularly to endorse all checks and drafts made payable to my order and collect the proceeds; to sign in my name checks on all accounts standing in my name, and to withdraw funds from said accounts, to open accounts in my name or in his name as my attorney-in-fact; to make such payments and expenditures as may be necessary in connection with any of the foregoing matters or with the administration of my affairs; to retain counsel and attorneys on my behalf, to appear for me in all actions and proceedings to which I may be a party in the Courts of the State of Indiana, or any other state in the United States, or in the Unit proceedings in my name if necessary answers, and other pleadings of every description; to make and verify income tax returns, and to the Lake County Recorder! represent me in all income tax matters before any office of the Internal Revenue Service, within the limitations of the applicable Revenue Rulings and rocedures; hereby giving and granting to my said attorney-in-fact full power and authority to do and perform all and every act and thing whatsoever necessary to be done in the premises, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney may do pursuant to this power.

This Power of Attorney shall take effect upon its execution by me and shall remain in full force and effect until my death or until my termination of it by giving written notice to my said attorney-in-fact at his address above by regular United States mail. This Power of Attorney shall not be affected by incapacity at a later date.

In Witness Whereof, I have hereunto set my hand and seal this 6 day of February 2000.

3 See Louis 1

STATE OF INDIANA )
) SS:
COUNTY OF LAKE )

Before me, the undersigned, personally appeared Fredelle H. Berkowitz, who

PAGE TWO OF A THREE PAGE POWER OF ATTORNEY

acknowledged the execution of the above and foregoing Power of Attorney as her free and

voluntary act and for the purposes expressed in it.

My Commission Expires: MARCH 3, 2008

Resident of LAKE County, Indiana

PAGE THREE OF A THREE PAGE POWER OF ATTORNEY

## Document is NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

