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STATE OF INDIANA
LAKE COUNTY
FILED RECORD

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GENERAL POWER OF ATTORNEY

MONROE W. CARTER
RECORDER

Know All Men by These Present, that I, Mrs. Ivy Briggs, SSN:

431-38-9081, 2929 West 20th Place , Gary, Lake County, Indiana

46404, have made, constituted and appointed, and by these present

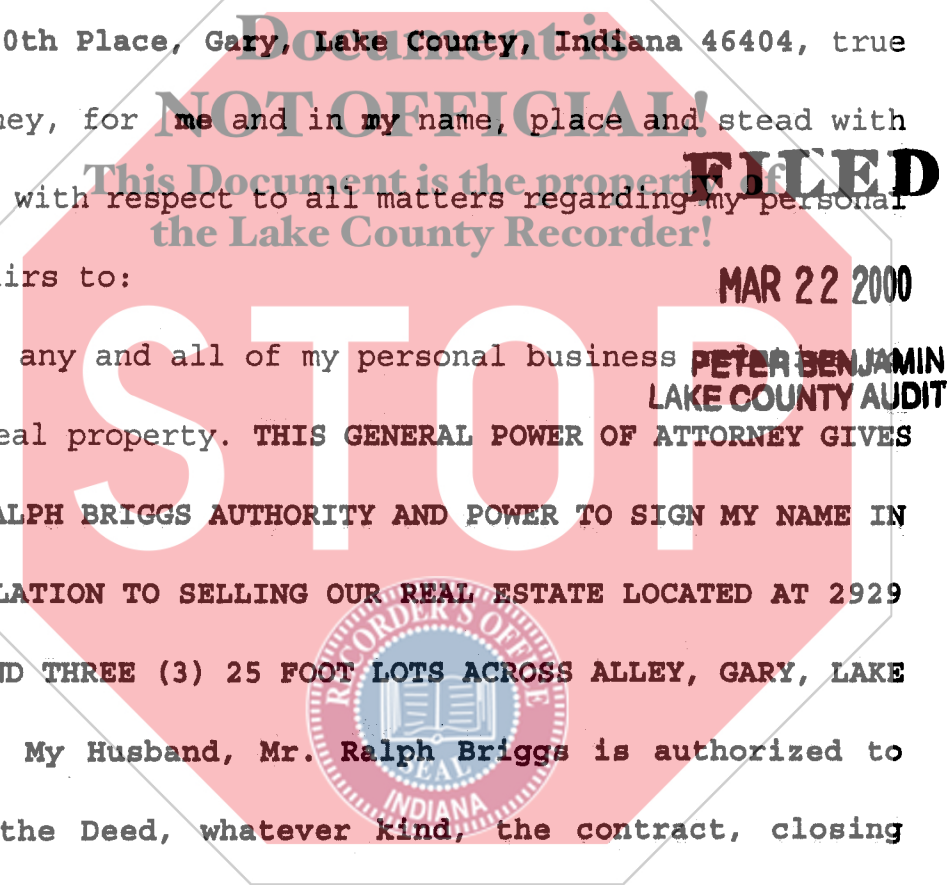
do make, constitute and appoint Mr. Ralph Briggs, SSN: 430-20-

0432, 2929 West 20th Place, Gary, Lake County, Indiana 46404, true

and lawful Attorney, for me and in my name, place and stead with

General authority with respect to all matters regarding my personal

and business affairs to:



1. Transact any and all of my personal business

my personal and real property. THIS GENERAL POWER OF ATTORNEY GIVES

MY HUSBAND, MR. RALPH BRIGGS AUTHORITY AND POWER TO SIGN MY NAME IN

RESPECT AND IN RELATION TO SELLING OUR REAL ESTATE LOCATED AT 2929

WEST 20TH PLACE AND THREE (3) 25 FOOT LOTS ACROSS ALLEY, GARY, LAKE

COUNTY, INDIANA. My Husband, Mr. Ralph Briggs is authorized to

sign my name on the Deed, whatever kind, the contract, closing

statement and all documents and papers related thereto.

2. This General Power of Attorney gives MR. Ralph Briggs,

further authority and powers to act as if he were alter egos of the

principal with respect to all possible matters and affairs

affecting property owned by the principal that the principal can

perform through an attorney-in-fact. I, Mrs. Ivy Briggs further

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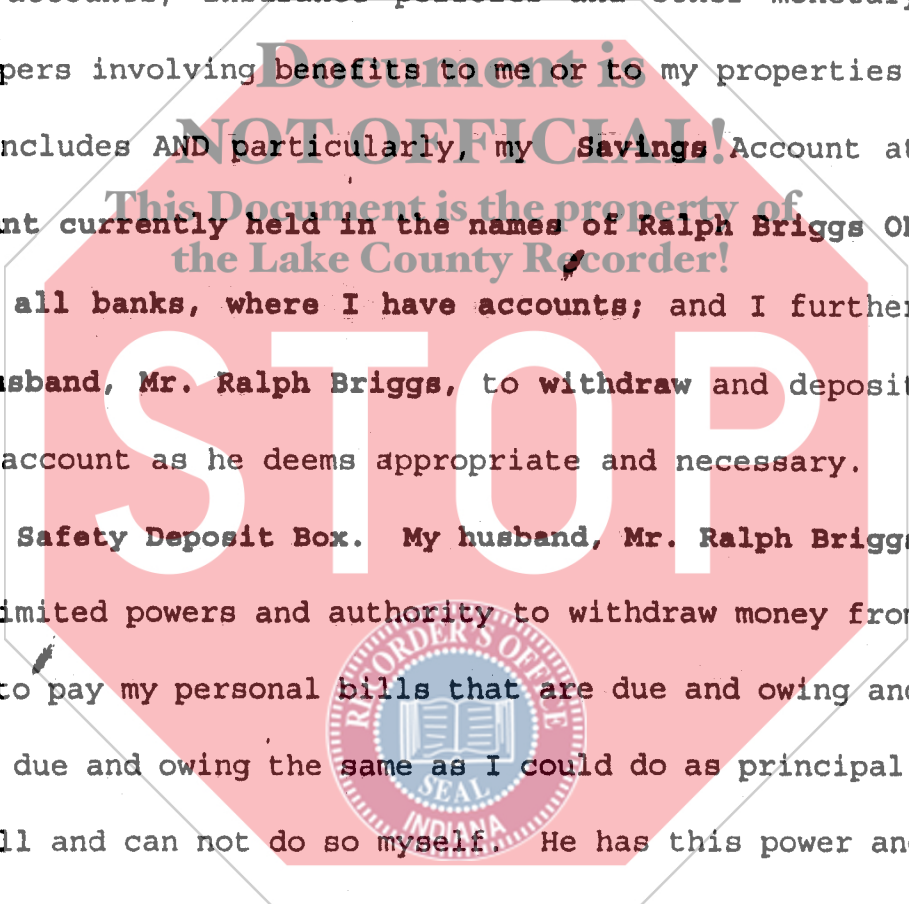
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grant this authority to extends to ALL situations, regarding both my PERSONAL AND REAL PROPERTIES--to include again, SELLING OF OUR REAL ESTATE LOCATED AT 2929 WEST 20TH PLACE, AND THREE (3) LOTS ACROSS ALLEY FROM SAID ADDRESS IN GARY, LAKE COUNTY, INDIANA AND ALL of my bank accounts, insurance policies and other monetary documents and papers involving benefits to me or to my properties.

This MAINLY includes AND particularly, my Savings Account at where said account currently held in the names of Ralph Briggs OR Ivy Briggs, and all banks, where I have accounts; and I further authorized my husband, Mr. Ralph Briggs, to withdraw and deposit money into said account as he deems appropriate and necessary.

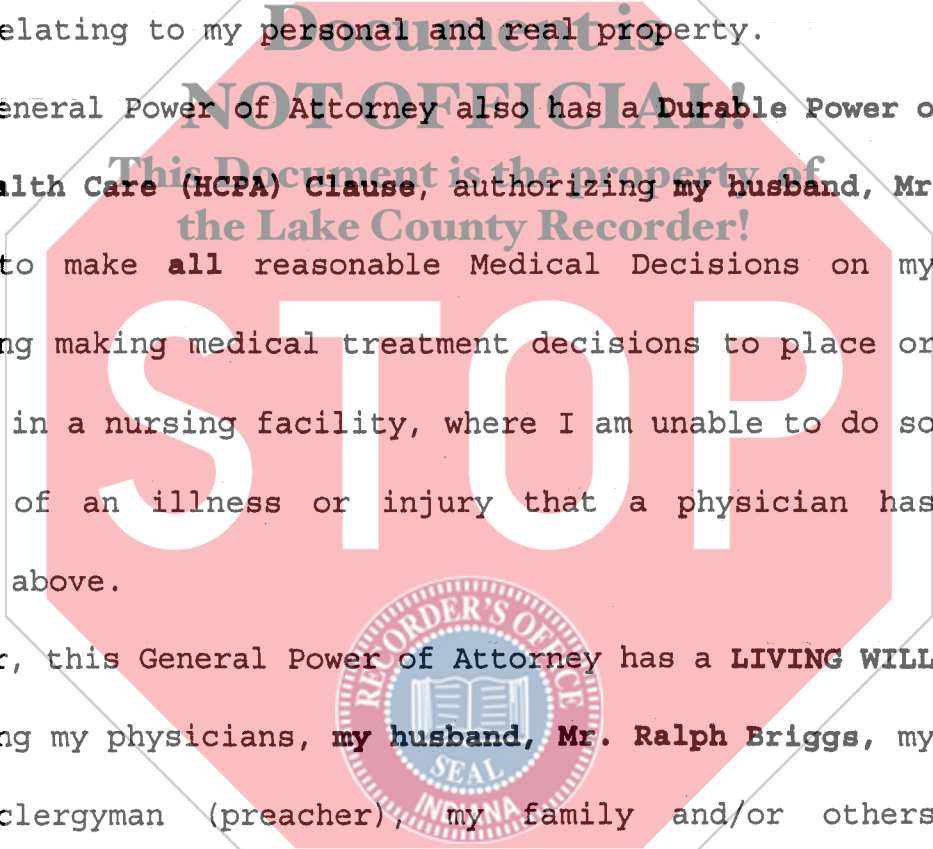
There is no Safety Deposit Box. My husband, Mr. Ralph Briggs has full and unlimited powers and authority to withdraw money from my said account to pay my personal bills that are due and owing and that will become due and owing the same as I could do as principal, since I am now ill and can not do so myself. He has this power and authority whether I am confined to my home, hospital or other institution to Cash my Social Security, Pension and all other checks that I am currently receiving and entitled to receive and that I may become entitled to receive in the future. Said agent is given full powers and authority to present for payment and demand payment all



negotiable instruments for cashing, issued to me as payee (paid to the order of myself) and/or where I am also payor (the check and/or draft is made out by me or my agent (s) as described above). This includes writing checks, depositing and withdrawing money from my bank accounts relating to my personal and real property.

4. This General Power of Attorney also has a Durable Power of attorney for Health Care (HCPA) Clause, authorizing my husband, Mr. Ralph Briggs, to make all reasonable Medical Decisions on my behalf, including making medical treatment decisions to place or not to place me in a nursing facility, where I am unable to do so myself because of an illness or injury that a physician has recommended the above.

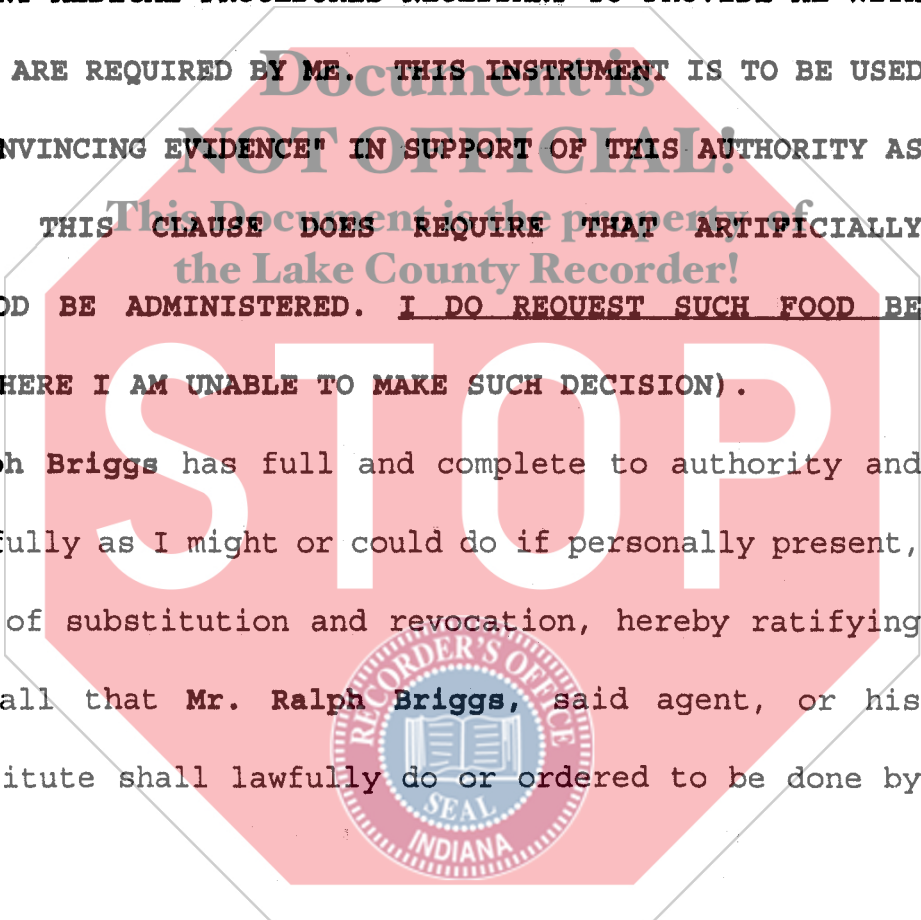
5. Further, this General Power of Attorney has a LIVING WILL CLAUSE, directing my physicians, my husband, Mr. Ralph Briggs, my attorney, my clergyman (preacher), my family and/or others responsible for my health, welfare or affairs, to observe my wishes should I, at any time, have an incurable disease or injury, certified by at least two (2) competent physicians to be a terminal condition to make all decisions relating thereto. Where said physicians determine that my death is imminent or is being needlessly prolonged by life-prolonging procedures, my wishes are



that I direct that such life prolonging procedures Not be used to prolong my life. (I DO NOT WISH LIFE-PROLONGING PROCEDURES TO BE USED SHOULD I BECOME UNABLE TO MAKE THIS DECISION AND THE PERFORMANCE OF ANY MEDICAL PROCEDURES NECESSARY TO PROVIDE ME WITH COMFORT AND CARE ARE REQUIRED BY ME. THIS INSTRUMENT IS TO BE USED AS "CLEAR AND CONVINCING EVIDENCE" IN SUPPORT OF THIS AUTHORITY AS GIVEN BY ME. THIS CLAUSE DOES REQUIRE THAT ARTIFICIALLY ADMINISTERED FOOD BE ADMINISTERED. I DO REQUEST SUCH FOOD BE PROVIDED TO ME WHERE I AM UNABLE TO MAKE SUCH DECISION).

6. Mr. Ralph Briggs has full and complete to authority and power to act as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that Mr. Ralph Briggs, said agent, or his designated substitute shall lawfully do or ordered to be done by virtue thereof.

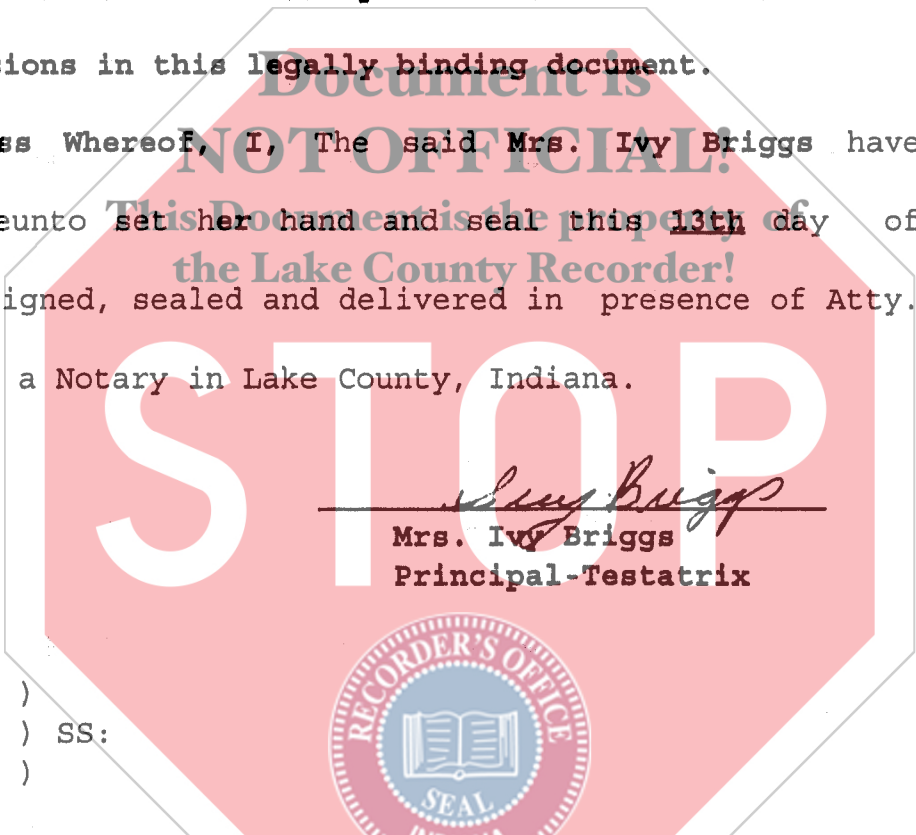
7. This Power of Attorney has a Testamentary Clause where I wish that any money, funds and the like that I possess at the time of my and/or our demise after all burial and legal expenses have been paid, to go my husband, Mr. Ralph Briggs for a donation as compensation for his, time, efforts and assistance provided me personally and to my business matters during my illnesses over the



past several years.

I have VOLUNTARILY signed this instrument with FULL UNDERSTANDING OF ITS CONTENTS WITHOUT COERCION, FRAUD OR DECEPTION. The contents of this General Power of Attorney have been fully explained to me and thus, I am fully satisfied with the above and foregoing provisions in this legally binding document.

In Witness Whereof, I, The said Mrs. Ivy Briggs have Voluntarily hereunto set her hand and seal this 13th day of December, 1999 Signed, sealed and delivered in presence of Atty. John Henry Hall, a Notary in Lake County, Indiana.



Ivy Briggs
Mrs. Ivy Briggs
Principal-Testatrix

State of Indiana)
) SS:
County of Lake)

Subscribed and sworn to before me, the undersigned, a Notary Public in and for said county, this 13th day of December, 1999. pvesonally appeared Ivy Briggs and acknowledged the execution of the foregoing instrument

Atty. John Henry Hall, Ed.D.
Notary Public John Henry Hall

My Commission Expires: March 12, 2000.

County of Residence: Lake

This legal instrument was prepared by Atty. John Henry Hall, Ed.D., 1937 Madison Street, P. O. Box 1498 Gary, Indiana 46407, Telephone Number 1 (219) 883-7711, FAX Number 1 (219) 883-1006, and Mobile Telephone 1 (219) 765-1714.

Filed: New Computer: a:[\Powerofa, Disc. #21.