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2000-041024  
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**SPECIAL POWER OF ATTORNEY**

I, James A. Maxey, residing at 9201 Grace Street, Highland, Indiana 46322, hereby appoint Janice Maxey of 9201 Grace Street, Highland, Indiana 46322, as my Attorney-in-Fact ("Agent").

My Agent shall have full power and authority to act on my behalf but only to the extent permitted by this Special Power of Attorney. My Agent's powers shall include the power to:

1. Sell or convey any interest of mine in real estate that is used by me as a personal residence and is located at 9201 Grace Street, Highland, IN 46322.

This power shall include the power to (i) sell upon such terms as my Agent shall deem appropriate, subject to the limitations (if any) stated above, (ii) sign any documents (including deeds) that may be required to convey title to such property, and (iii) collect and receive the proceeds from any such sale.

2. Purchase, in my interest, real estate to be used as a personal residence that is located at 52377 Crimson Maple Drive, Granger, IN 46530.

3. Mortgage or encumber any interest of mine in real estate (whether currently owned or later acquired).

This power shall include the power to (i) mortgage or encumber on such terms as my Agent shall deem appropriate, subject to the limitations (if any) stated above, (ii) sign any documents (including a mortgage or deed of trust), and (iii) take any other action that may be required to effect such mortgage or encumbrance.

I grant to my Agent the full right, power, and authority to do every act, deed, and thing necessary or advisable to be done regarding the above powers, as fully as I could do if personally present and acting.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, and (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney.

**FILED**

I authorize my agent to indemnify and hold harmless any third party who accepts and acts under this document.

HOLD FOR FIRST AMERICAN TITLE  
LAKE COUNTY AUDITOR

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My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any services provided as my Agent. My Agent shall not be entitled to reimbursement of expenses incurred in connection with this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent, if I so request or if such a request is made by any authorized personal representative or fiduciary acting on my behalf.

This Power of Attorney shall become effective immediately, and shall not be affected by my disability or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue effective until June 30, 2000. This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

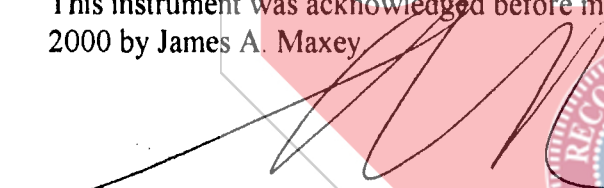
Dated MAY 21, 2000, at South Bend, Indiana.

  
James A. Maxey

State of Indiana

County of ST. JOSEPH

This instrument was acknowledged before me on this 21 day of MAY, 2000 by James A. Maxey

  
Notary Public

Shawn P. RYAN  
Title (and Rank)

My commission expires 1/27/01

This document was prepared by:

Name: Shawn P. Ryan  
Address: 400 Plaza Building, 210 South Michigan Street  
South Bend, IN 46601