

SEAL OF INDIANA  
FILED

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# Durable Power of Attorney

MORRIS W. CARTER

RECORDER

I (We Susan L. Arwood of 624 1/2 W. Barry, Chicago, IL  
do make, constitute and appoint Michael F. Fabus of 624 1/2 W. Barry, Chicago, IL  
my (our) true and lawful attorney, to act in, manage, and conduct all my (our) estate and all my (our) affairs, in my (our) name, place  
and stead as my (our) act and deed, either to do and execute, or to concur with persons jointly interested with me (us) in the doing or  
executing of all or any of the following acts, deeds, and things:

To borrow money on such terms as my (our) attorney may choose.

To purchase, sell, lease, convey, assign, pledge, hypothecate, mortgage and warrant, or otherwise deal with any or all real or  
personal property in which I (we) may have an interest, for such purposes and upon such terms and in such form as my (our) attorney  
may choose, including, but not limited to, property located in the

Lake County, State of Indiana, described as:

**NOT OFFICIAL!**  
This Document is the property of  
See Legal Attached  
the Lake County Recorder!

Commonly known as: 9422 Van Buren, Crown Point, IN 46307

Tax Identification Number: 23-167-31 including all lands and interests therein contiguous or appurtenant  
to land owned or claimed by me (us), whether or not specifically described above.

To make, execute, acknowledge and deliver under seal or otherwise any contract, agreement, bond, note, mortgage, deed of  
trust, deed, assignment, pledge, security agreement, power, guaranty, application for credit, application for insurance, statement, tax  
form, affidavit, disclosure, consent, amendment, election, vote, waiver, escrow agreement, endorsement, certification, promise,  
receipt, acknowledgment, instruction, order form, commitment, accounting, notification, letter, rider, addendum, authorization,  
appointment, power of attorney, stipulation, disclaimer, accord and satisfaction, settlement statement, settlement agreement, closing  
statement, closing instruction, disbursement authorization, listing agreement, subordination agreement, release discharge,  
questionnaire, proprietary certificate, request, document, form required by any federal, state or local law, regulation or ordinance, or  
other instruments which said attorney may deem necessary;

To make, draw, sign, endorse, accept or otherwise place my (our) name or signature upon any checks, notes, drafts or other  
instruments;

And to receive and collect and to give acquittances for all sums of money at any time due me (us).

Giving and Granting unto my (our) named attorney full power and authority to do and perform all and every act, deed,  
matter and thing whatsoever, in and about my (our) estate, property, and affairs as fully and effectually to all intents and purposes as I  
(we) might or could do in my (our) own proper person if personally present, the above specifically enumerated powers begin in aid  
and exemplification of the full, complete, and general power herein granted and not in limitation or definition thereof, and hereby  
ratifying all that my (our) said attorney shall lawfully do or cause to be done by virtue of this document.

And I (we) hereby declare that any act or thing lawfully done hereunder by my (our) said attorney, whether done before or

TICOR TITLE INSURANCE  
Crown Point, Indiana

92-3868

13.00  
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after the date this document is signed and delivered by me (us), shall be binding on me (us) and my (our) heirs, conservator, guardians, trustees, legal and personal representative, and assigns, whether at the same shall have been done before or after my (our) death, other revocations of this instrument, unless and until reliable intelligence or notice thereof shall have been received by my (our) said attorney.

This appointment being executed by me (us) shall cover my (our) jointly and severally owned property, property owned by me (us) in the entireties or as community property, and property owned by a trustee for my (our) benefit.

This power of attorney shall expire and terminate on August 18, 19 2000

This power of attorney shall not be affected by my disability (or the disability of either or both of us).

In Witness Whereof, I (we) have set my (our) hand and seal this 7th day of

August 19 2000

Witnesses: Christine Cuevas Christine Cuevas Signer: Susan L. Arwood  
Susan L. Arwood aka Susan Lynn Arwood

STATE OF ILLINOIS )  
County of COOK ) SS.

The forgoing instrument was acknowledged before me this 7 day of August, 2000, by Susan L. Arwood aka Susan Lynn Arwood



Notary Public [Signature]

State of ILLINOIS

County of COOK

My Commission Expires: 09-15-01

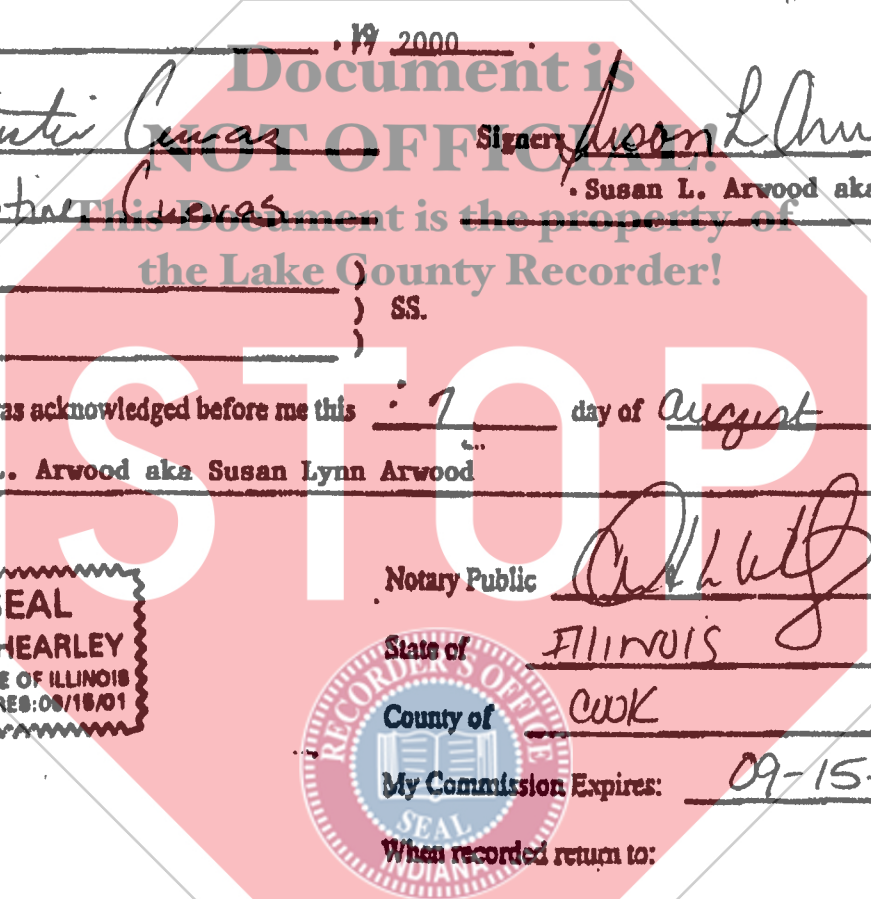
When recorded return to:

This instrument drafted by:  
Bank One, N.A.  
P.O. Box 7700  
Indianapolis, IN 46277

(Blank lines completed by:

Susan L. Arwood)

Please Type



## LEGAL DESCRIPTION

Part of Tract 20 In Pebble Brooks, Phase Three, a Planned Unit Development, In the City of Crown Point, as per plat thereof, recorded in Plat Book 74 page 25, in the Office of the Recorder of Lake County, Indiana, which part of said Tract 20 is described as follows: Beginning at the Southeastery most corner of said Tract 20; thence South 81 degrees 17 minutes 11 seconds West along the Southerly line of said Tract 20, a distance of 33.72 feet; thence North 26 degrees 06 minutes 37 seconds West, parallel with the Westerly line of said Tract 20, a distance of 88.27 feet to a point on the Northerly line of said Tract 20; thence North 63 degrees 53 minutes 23 seconds East along said Northerly line of Tract 20, a distance of 56.28 feet, to the Northeastery most corner of said Tract 20; thence Southerly along the curved Easterly line of said Tract 20, being a curve concave to the West and having a radius of 211.11 feet, an arc distance of 96.29 feet to a point of reverse curvature; thence continuing Southerly along a curve concave to the East and having a radius of 170.46 feet, an arc distance of 5.94 feet to the point of beginning.

