STATE OF INDIANA LAKE COUNTY FILED FOR PLOORD

2000 070423

U/U423 2000 SEP 27 AH 9: 46 Chicago Title Insurance Company

62-4093 LD

MORRIS W. CARTER'S RECORDER

LIMITED POWER OF ATTORNEY

(REAL ESTATE)

SCOTT E. RINGLER

County, State of Indiana, as my true and lawful attorney-in-fact. nis Document is the property of

the Lake County Recorder!

I. POWERS AND PURPOSES

The Condominium unit designated as 8460 Kooy Drive, Munster, Indiana, 46321, in Building 1 of Bieker Woods Townhomes, a Horizontal Property Regime, created by Condominium Declaration recorded April 25, 1986 as Document No. 851208, as amended by instrument recorded September 12, 1986 as Document No. 851208 and amended by instrument recorded September 12, 1986 as Document No. 874780 and as per plat thereof, recorded in Plat Book 61 page 41, in the Recorder's Office of Lake County, Indiana. Together with the undivided interest in the common areas appertaining.



8460 KOOY DR. MUNSTER IN the address of such real estate is commonly known as _

(the "Real Estate") and shall be construed so as to effectuate this purpose. This authority shall include, by way of illustration and not limitation, the power:

To make, draw and indorse promissory notes, checks or bills of exchange pertaining to the Real Estate and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;

To make and execute any and all contracts pertaining to the Real Estate;

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PETER BENJAMIN LAKE COUNTY AUDITOR 01687

E.Chicago Tide Insurance Company

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To receive and to demand all sums of money, debts, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to compromise, settle or discharge, the same;

To bargain for, contract concerning, buy, sell, encumber and in anyway and manner, deal with personal property located upon or pertaining to the Real Estate; and,

To execute any and all documentation necessary to effectuate the transactions described above, including, but not limited to, closing statements, instruments of conveyance and supporting documentation, certifications, acknowledgements, and like instruments.

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H. EFFECTIVE	E DATE AND TI	ERMINATION	Docu	ıme	nt is		
A. This power	of attorney shall	t be effective: (see This Do			CIA e prop	L! erty of	
CXXXII as of th	e date it is sign	the]	Lake Co	ounty	Record	der!	
Cimm as of the	•	day of	19				
LI upon the	e determination	that I am disable	d or incapacitat	ed, or no long	ger capable of	managing my a	ffaire prudently.
My disability or	incapacity, for	this purpose, may	y be established	by the certifi	icate of a qual	fied physician s	tating that I am
unable to mane							
			TITLE TO THE TENT	DER'S O	EL .	•	
B. My disability	or incompetend	ce (select appropr	riate provision);	(shail) (shail i	not) affect or te	rminate this Por	wer of Attorney.
C.This power of	f attorney shall:	terminate: (selec	l appropriate pr	ovision)			
	:		(11)	NDIANA	mi		
upon my	/ incapacity				/	:	
upon the) <u></u>	_ day of	19_	······································			
XXI upon the	4 4	f recordation with	the Recorder's	Office of the	County where	o the Real Esta	te is located a

III. RATIFICATION AND INDEMNIFICATION

I/We hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof. Further, I/We agree to indemnity and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-in-fact in reliance upon this Power, without actual knowledge of its revocation.

P. 04/04

IN WITNESS WHEREOF, I/We have hereunto set my/our hand(e) and seal(s) this 19 day of SEPT . OCC Printed: Scott E Reviels A.
Printed: Document is
STATE OF OKCHOMA
country of LAKE toufty Toufty Kecorder!
Before me, a Notary Public in and for said County and State, personally appeared
and Thanks E. Shirt who soknowledged the execution of the foregoing Power of Attorney, and
who, having been duly sworn, stated that any representations therein contained are true. WITNESS my hand and Noterial seal, this day of
Principal: Marsha E ELLI OTT Notary Public
My County of Residence:
APril h. 2001 Tulsi
This instrument was prepared by SCOTT E. RINGLER attorney at law.