

THIS FORM HAS BEEN PREPARED FOR USE WITHIN THE STATE OF INDIANA. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW AND SHOULD ONLY BE DONE BY A LAWYER.

POWER OF ATTORNEY

OF	200;
 ELOY GUERRERO	2
PRINCIPAL	2
TO	9161
 ANNA GUERRERO	60
ATTORNEY IN FACT	

made under Indiana Code 30-5, as it may be amended, or replaced (the "Statute")

I, as principal, designate and name the person whose name appears above to be my attorney in fact.

Powers. According to the Statute, an attorney in fact has a power granted under IC 30-5 if the power of attorney incorporates the power. Therefore, by referring to the language of the Statute describing powers, this Power of Attorney incorporates into it the powers liefe listed and confers general authority with respect to them:

This Document is the prop	perty of	F ~	
real property transactions; County Recor	derl (IC3)	기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기	٠ - ا
tangible personal property transactions;	(IC 30	0-5-5-3)	
bond, share, and commodity transactions;	•	0-5-5-4)	
banking transactions;		0-5-5-5)	
business operating transactions;)-5-5-6)	
insurance transactions;)-5-5-7)	
beneficiary transactions;	,)-5-5-8)	
gift transactions;	· ·)-5- 5- 9)	
fiduciary transactions;	,)-5-5-10)	
claims and litigation;	`)-5-5-11)	
family maintenance;)-5-5-12)	
benefits from military service;)-5-5-13)	
records, reports, and statements;	(IC 20	\ 5 \ 5 \ 1 \d\\	
estate transactions;	(IC 30	Ration	
all other matters.	(IC 30	Baig.	SI).
	(10 30	J-J-19)	

(Note: Though the Statute grants powers with respect to health care (16,30,5-5,16) and IC 30-5-5-17) and delegation (IC 30-5-5-18), this Power of Attorney does not (Note: Though the Statute grant I and IC 30-5-5-17) and delegation (IC 30-5-5-18), this Power of Attorney concerning include them. Health care can be provided in a separate power of approximation CAKE COUNTY AUDITOR

HOLD FOR FIRST AMERICAN TITLE

FATIC has recorded this instrument as an accomodation only.

No examination has been made of the document or the property affected

POWER OF ATTORNEY	Page Two
Of Principal: Eloy Guerrero	J
To Attorney In Fact: Anna Guerrero	
Any power I do not wish to incorporate into this Power of A by lining out and writing my initials opposite the deletion. Any power to be me modified or added as follows (and have verified by writing my initials in the the margin): Power to initiate, continue or terminate any	odified or added, I have a space provided here in y U.S. Post Office
transaction, and to receive any mail from n	ny post office box.
IN FURTHERANCE OF THESE POWERS, I give my attorn on my behalf and to do for me and in my name those things which such att and necessary to effectuate the intent of this Power of Attorney, as fully as	corney deems expedient
B. Reservation of Power to Act and to Revoke. I reserve unt power to act on my own behalf and also to revoke or amend this Power of	o myself, however, the Attorney.
C. Chapters of Statute Also Applicable. The following chap	nters of the Statute also
apply to this Power of Attorney and acts performed under it: Definitions (IC 30-5-2) Reliance General Provisions (IC 30-5-3) is the property Liability Duties (IC 30-5-6) ake County Recorder! Termin	e (IC 30-5-8) les (IC 30-5-9)
D. Liability of Attorney in Fact. As permitted by IC 30 specifically provide that my attorney in fact is liable only if my attorney in fact is liable only if my attorney in fact.	-5-9-5, I, as principal,
E. Reliance on Power of Attorney. In addition to provisions of reliance, the holding institution(s) named in this Paragraph E and the banking Paragraph F may rely on this Power of Attorney being in effect unless I shall hastrument revoking or changing it and delivered such instrument, or cause such person(s):	ng institution named in
Holding Institution Type of Account	Account Number

All other persons to whom this Power of Attorney may be delivered may rely on its being in effect unless I shall have executed a proper instrument revoking or changing it and recorded such

POWER OF ATTORNEY Of Principal: Eloy Guerrero	Page Three
To Attorney In Fact: Anna Guerrero	
TO LECTION THE PAGE. PAINTA GUEFFERO	
instrument, or caused it to be recorded, in the State of Indiana.	e Office of the Recorder of County,
F. Safe Deposit Box. I have a sa	ufe deposit box, Number 2027
at People's Bank	Indianapolis Blvd., East Chicago, IN 46312
(BANKING INSTITUTION)	(BRANCH) (CITY)
in my name either individually or jointly wit property from such box or add property to it, a	h any other person. I give the power also to remove and to relocate such box within the banking institution ion to those incorporated into this Power of Attorney
PROVISIONS BY STRIKING ALL INAP striking, provision "a." applies:	PLICABLE PROVISIONS (In case of insufficient by is not terminated by my incapacity.
b. This Power of Attorne	
e. This Decurre	t is the property of
/	Recorder , whichever first occurs.
I signed before date of this Power of Attorne	I do/do not (strike one) revoke all powers of attorney ey. Revocation does not affect the validity of an act n case of failure to strike, prior powers are revoked.
are commenced, I nominate Anna Guerrer	ceedings for my person or for my estate, or for both, as guardian of my person, and dian of my estate, to serve in each case without bond
as may be permitted by law.	DER'S OZ
name None	As a successor to my attorney in fact, I designate and Such successor shall become my attorney in fact has/have failed or ceased to serve as specified in the
By giving me written notice w	thile I am not incapacitated, my attorney in fact may
resign or decline to serve. During a period of	f my incapacity, my attorney in fact shall continue to

serve until a successor attorney in fact is authorized to act under this Power of Attorney, whether designated and named in this Power of Attorney as such successor or selected by a court of

competent jurisdiction to be such successor.

Of Deinsteat.	Page Four
Of Principal: Eloy Guerrero	
To Attorney In Fact: Anna Guerrero	
•	
K. Binding Effect. Any act or thing performed by my attached in	
and the state of thing periorined by the sillotties in	fact under this
Power of Attorney binds me and my successors in interest, as the Statute provides.	
1	
Signed this 29th day of January, 2001, 2000, in 6 co	umtomonto au al-
of which shall be considered an original.	unterparts, each
or which blair of considered an original.	
Counterment N. 2	
Counterpart No. 3	,
Eloy Guerrero	*
Con y since to lesso	
PRINCIPAL'S SIGNATURE	
453-46-784 0	
PRINCIPAL'S SOCIAL SECURITY NUMBER	
5022 Baring Avenue	
PRINCIPAL'S STREET OR OTHER ADDRESS	,
East Chicago, IN 46312	
PRINCIPAL'S CITY, STATE AND ZIP CODE	
NOTOTICIAL	
STATE OF INDIANA NOT OFFICIAL!	
STATE OF INDIANA	
COUNTY OF LAKE This Socument is the property of	
the Lake County Recorder!	
Before me, the undersigned, a Notary Public in and for said County and State, this	29th day of
January, 2001, 2006, personally appeared the principal named above, signed this Power acknowledged the execution of it as the valuation and the principal named above, signed this Power acknowledged the execution of it as the valuation and the principal named above, signed this Power acknowledged the execution of it as the valuation and the principal named above, signed this Power acknowledged the execution of it as the valuation and the principal named above, signed this Power acknowledged the execution of its as the valuation and the principal named above, signed this Power acknowledged the execution of its as the valuation and the principal named above, signed this Power acknowledged the execution of its as the valuation and the principal named above, signed this Power acknowledged the execution of its as the valuation and the principal named above and the principal named above and the principal named above acknowledged the execution of its as the valuation of its as the va	r of Attorney, and
as the voluntary act and deed of the principal, for the uses and purpose	ee therein stated
IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year la	ast above written.
(Uts P M)	
NOTARY PUBLIC'S SIGNATURE	
Aila R. Goldziles	` `
NOTARY PUBLIC'S NAME, PRINTED OR TYPED	
My Commission expires: Oct. 27, 2006 Resident of Lake County	
Resident of Lake County.	
This instrument prepared by Noah L. Holcomb, Jr.	Attorney At Law.

POWER OF ATTORNEY

The Allen County Indiana Bar Association, Inc. (Printed Feb. 1992)

Page Four