(3)

GENERAL DURABLE POWER OF ATTORNEY

- 1. I, LARRY J. ROBERTSON, of Lake County, State of Indiana, being more than 18 years of age and mentally competent, do hereby designate LINDA J. ROBERTSON as my true and lawful attorney-in-fact. It is my explicit intention that this Power of Attorney shall not be affected by subsequent disability or incapacity of myself as the principal.
- 2. The above named attorney-in-fact shall have all powers allowed under Indiana Law, specifically including, but not limited to those enumerated at IC 30-5-1-1 et. seq. The following are examples of those powers which my attorney-in-fact shall possess:
 - a. To make and execute any and all contracts;
 - b. To consent to necessary medical treatment;
 - c. To have access to any and all safe deposit boxes in my name and to open, inspect, inventory, place items into, or remove from the safe deposit box;
 - d. To execute documents to transfer the title to any motor vehicle owned by n
 - e. To purchase, assign, maintain, borrow against, liquidate, change beneficiaries and generally deal in all forms of insurance and claims thereon,
 - f. To purchase, sell, mortgage, convey and lease any interest in real estate, wherever located, of which I may be owner now or hereafter;
 - g. To receive and to demand all sums of money, debts, dues, accounts, bequests, interest, and dividends which may become due or payable to me, and to settle or discharge the same;
 - h To sell, purchase, dispose of, assign and pledge any U.S. Savings Bond ETER BENJAMIN Treasury Securities in which I may have an interest;
 - i. To represent me in all matters relating to taxation, whether by the Federal government, the government of any state or any local government unit, and to prepare, sign and file any documents or forms that may be required in these matters;
 - j. To bargain for, contract for, buy or sell, or in any other manner deal with personal property of any kind or nature and to apply or make use of my property for my support and those persons to whom I owe an obligation of support;
 - k. To make, draw and indorse promissory notes, checks, or bills of exchange, and to waive demand, presentment, notice of protest, and notice of non-payment of all such the instruments; and I hereby ratify and confirm all that my attorney-in-fact shall do by

HOLD FOR FIRST AMERICAN TITLE

virtue hereof.

- 3. This Durable Power of Attorney shall become effective on the $\frac{2+1}{2}$ day of $\frac{1}{2}$ 2002, and shall not be affected by my subsequent disability or incompetence.
- 4. I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until I have executed and recorded in the Recorder's Office of Lake County, Indiana, a written revocation hereof. Unless revoked earlier, this Power of Attorney shall expire at 11:59 pm, December 31, 2002, whether or not such revocation has been recorded.
- 5. I, LARRY J. ROBERTSON, further agree to indemnify 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.
- 6. In the event judicial proceedings are brought to establish a guardianship over my person or property, I hereby appoint LINDA J. ROBERTSON to serve as guardian.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of JUNE 2002.

ument is the property of

the Lake County Recorder!

STATE OF INDIANA)

) SS:

COUNTY OF LAKE)

Before me, a Notary Public in and for Lake County, Indiana, personally appeared LARRY J. ROBERTSON, who acknowledged the execution of the foregoing General Durable Power of Attorney. WITNESS my hand and Notarial seal this fine day of June, 2002.

Sparox S. Osharr Comm # 497881 Notary Public Opril 5, 2009

My Commission Expires:

This Instrument was prepared by August E. Hawkins, Attorney at Law.