2002 06026 LAST WILDMAND TESTAMENT OF CLEMPICKENS

I, CLEM PICKENS, of GARY, Indiana, revoke my former Wills and Codicils and declare this to be my Last Will and Testament.

ARTICLE I IDENTIFICATION OF FAMILY

I am married to DELLA L. PICKENS and all references in this Will to "my spouse" are references to DELLA L. PICKENS.

The name of my child is PHYLLIS D. LAWSON. All references in this Will to "my children" are references to the above-named child.

The failure of this Will to provide for any distribution to my child(ren): ANTHONY PICKENS and GREGORY PICKENS is intentional.

NOT OFFICIAL!

This DocumARTICLE II property of PAYMENTS OF DEBTS AND EXPENSES

I direct that my just debts, funeral expenses, and expenses of last illness be first paid from my estate.

ARTICLE III DISPOSITION OF PROPERTY

- A. Specific Bequests. I direct that the following specific bequests be made from my estate.
 - 1. EDUCATIONAL EXPENSES shall be distributed to ALL GRANDCHLDREN. If this beneficiary does not survive me, this bequest shall be distributed with my residuary estate.
 - 2. My remaining tangible personal property shall be distributed to PHYLLIS D. LAWSON. If this beneficiary does not survive me, this bequest shall be distributed with my residuary estate.

22th

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B. Residuary Estate. PICKENS. If my spot PHYLLIS D. LAWSO does not survive me, r percentages as shown:	use does not survive r N, of <u>Heipell</u> ny residuary estate sh	ne, my residuary 3ゃんひ	estate shall be, GERMANY.	distributed to If such beneficiary
distributed properly		person does not		
100.00 % - Percei	•	distributees fister	a under uns pre	JV151011.
		RTICLE IV ION OF EXEC	UTOR	
I nominate PHYILLIS	D LAWSON of 1-	leidel Box	C G	FRMANY as the

ARTICLE V EXECUTOR POWERS

Executor, without bond or security.

My Executor, in addition to other powers and authority granted by law or necessary or appropriate for proper administration, shall have the right and power to lease, sell, mortgage, or otherwise encumber any real or personal property that may be included in my estate, without order of court and without notice to anyone.

My Executor shall have the right to administer my estate using "informal", "unsupervised", or "independent" probate or equivalent legislation designed to operate without unnecessary intervention by the probate court.

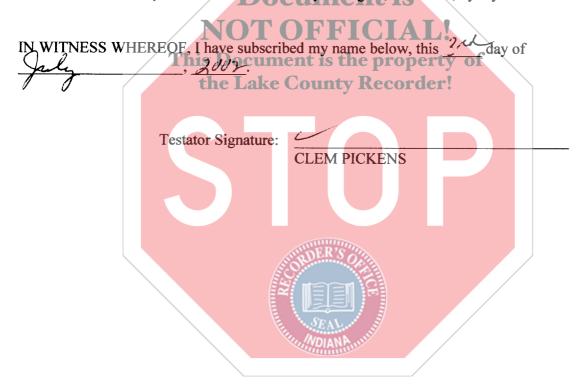
ARTICLE VI MISCELLANEOUS PROVISIONS

A. <u>Paragraph Titles and Gender.</u> The titles given to the paragraphs of this Will are inserted for reference purposes only and are not to be considered as forming a part of this Will in interpreting its provisions. All words used in this Will in any gender shall extend to and include all genders, and any singular words shall include the plural expression, and vice versa, specifically including "child" and "children", when the context or facts so require, and any pronouns shall be taken to refer to the person or persons intended regardless of gender or number.

B. Thirty Day Survival Requirement. For the purposes of determining the appropriate

distributions under this Will, no person or organization shall be deemed to have survived me unless such person or entity is also surviving on the thirtieth day after the date of my death.

- C. <u>Common Disaster.</u> If my spouse and I die under circumstances such that there is no clear or convincing evidence as to the order of our deaths, or if it is difficult or impractical to determine which person survived the death of the other person, it shall, for the purpose of distribution of my life insurance, property passing under any Trust or other contracts, if any, and property passing under this Will, be conclusively presumed that I predeceased my spouse, and notwithstanding any other provision of this Will, my spouse (or my spouse's estate as the case may be) shall receive the distribution to which my spouse would otherwise be entitled to receive without regard to a survivorship requirement, if any.
- D. <u>Liability of Fiduciary</u>. No fiduciary who is a natural person shall, in the absence of fraudulent conduct or bad faith, be liable individually to any beneficiary of my estate, and my estate shall indemnify such natural person from any and all claims or expenses in connection with or arising out of that fiduciary's good faith actions or nonactions as the fiduciary, except for such actions or nonactions which constitute fraudulent conduct or bad faith.
- E. <u>Beneficiary Disputes</u>. If any bequest requires that the bequest be distributed between or among two or more beneficiaries, the specific items of property comprising the respective shares shall be determined by such beneficiaries if they can agree, and if not, by my Executor.



We, the undersigned, hereby certify that the above instrument, which consists of ______ pages, including the page(s) which contain the witness signatures, was signed in our sight and presence by CLEM PICKENS (the "Testator"), who declared this instrument to be his/her Last Will and Testament and we, at the Testator's request and in the Testator's sight and presence, and in the sight and presence of each other, do hereby subscribe our names as witnesses on the date shown above.

Witness Signature:

Name:

BRENDA SHEPARD

City:

GARY

State:

INDIANA

Witness Signature:

Name:

TONI V. SIMMONS

City:

GARY

State:

INDIANA

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STOP

AFFIDAVIT

STATE OF IN	DIANA	
COUNTY OF	LAKE	

UNDER PENALTIES FOR PERJURY, we, the undersigned testator and the undersigned witnesses, respectively whose names are signed to the attached or foregoing instrument declare:

- (1) That the testator executed the instrument as the testator's will;
- (2) That, in the presence of all of the witnesses, the testator signed;
- (3) That the testator executed the will as a free and voluntary act for the purposes expressed in it;
- (4) That each of the witnesses, in the presence of the testator and of each other, signed the will as a witness;
- (5) That the testator was of sound mind when the will was executed; and
- (6) That to the best knowledge of each of the witnesses the testator was, at the time the will was executed, eighteen (18) or more years of age or was a member of the armed forces or of the merchant marine of the United States or its allies.

ocument is **Testator Signature** Document is the property of the Lake County Recorder! Witness Signature: Name: **BRENDA SHEPARD** City: **GARY INDIANA** State: Witness Signature: Name: TONI V. SIMMONS City: **GARY** State: INDIANA

Notary Public, or other officer authorized to take and certify acknowledgements and administer oaths

Evelyn Wallace Notary My Commission Expires July 8, 2008

