

MAIL TO: KATHLEEN M. SCHNYDER
→ 3336 GEORGE ST., - HIGHLAND, IN.
46322

DURABLE POWER OF ATTORNEY

This date July 24, 20 01

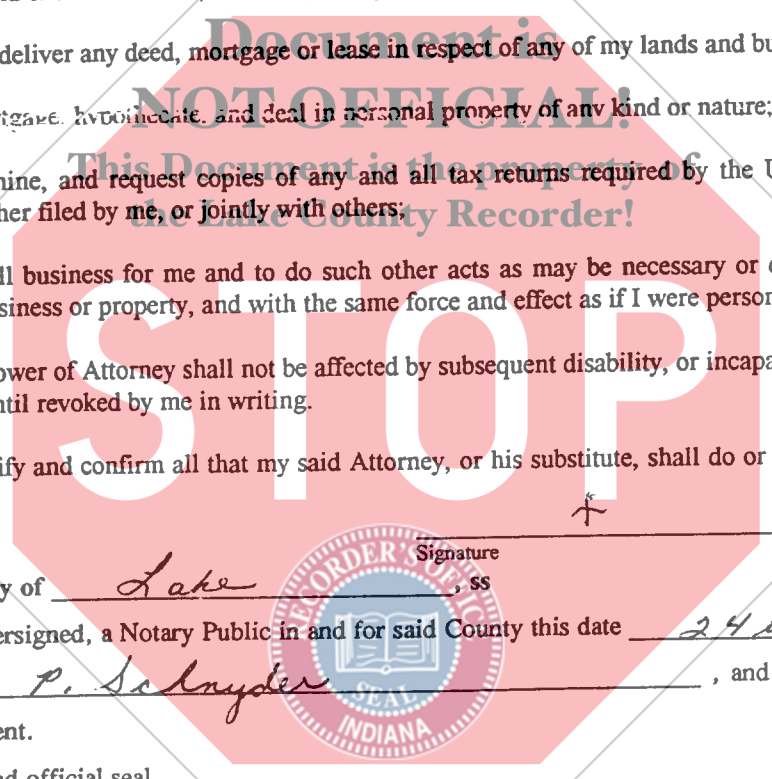
I, Marlene P. Snyder, of the City/Town of Highland,
County of Lake, State of Indiana, hereby appoint Kathleen Marie Snyder
of the City/Town of Highland, County of Lake, State of Indiana,
as my true and lawful Attorney, for me and in my place and stead, with full power of substitution.

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My true and lawful Attorney shall have the power to:

1. make, indorse, draw and accept promissory notes, checks, bills of exchange, drafts or other negotiable instruments; and to enter any lock box I may have in any banking institution;
2. exercise such rights, voting or otherwise, as I may have in any corporation, by virtue of my ownership of any stock, bonds, or securities therein, either absolutely or collateral;
3. receive, demand, sue for and recover all property—real or personal, claims, debts, moneys, accounts, legacies, dividends, annuities, proceeds of insurance, recoveries—that are now due or may hereafter become due;
4. adjust, compromise, and execute releases, therefore, as my attorney shall deem fit;
5. to make, execute, and deliver any deed, mortgage or lease in respect of any of my lands and buildings, or any part thereof;
6. to buy, sell, trade, mortgage, hypothecate, and deal in personal property of any kind or nature;
7. to execute, file, examine, and request copies of any and all tax returns required by the United State or any political subdivision thereof, whether filed by me, or jointly with others;
8. to transact any and all business for me and to do such other acts as may be necessary or desirable to be done to save, protect or promote my business or property, and with the same force and effect as if I were personally present.

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MORRIS W. CARTER
RECORDER
2002 NOV - 4 PM 12:09



Furthermore, this Power of Attorney shall not be affected by subsequent disability, or incapacity, or by lapse of time, and shall continue in effect until revoked by me in writing.

And I do hereby ratify and confirm all that my said Attorney, or his substitute, shall do or cause to be done by virtue of this power of attorney. *(Signature)* Marlene Snyder has multiple Sclerosis which has affected her ability to sign

State of Indiana, County of Lake
Before me, the undersigned, a Notary Public in and for said County this date 24th of July, 2001
came, Marlene P. Snyder, and acknowledged the execution of the foregoing instrument.



Witness my hand and official seal.
My commission expires 7-23-06 Hilda G. Rosario, Notary Public
Signature
Hilda G. Rosario (Printed)

This instrument prepared by: Hilda G. Rosario Resident of Lester County

10.00
OS
CP