DURABLE POWER OF ATTORNEY

	October 9,	, 2003			0
Ι,	Harry Matasar		, of the City/To	wn of Munster	<u>ω</u>
County of	Lake ,	, State of Indiana, hereb	y appoint <u>Dal</u>	e E. Matasar	0
of the City/To	own of Mannatan	Countr	rof Talaa		Construction
as my true and	own of <u>Munster</u> I lawful Attorney, for me and	in my place and stead, v	with full power of	substitution.	, State of Indian
My true a	and lawful Attorney shall hav	e the power to:			ω,
1. make, indo enter any lock	orse, draw and accept promiss box I may have in any bankin	sory notes, checks, bills on the institution;	of exchange, draf	s or other negotiable i	nstruments; and
2. exercise suc or securities th	ch rights, voting or otherwise, nerein, either absolutely or col	s, as I may have in any collateral;	orporation, by vir	tue of my ownership o	Rany Stock, bond
3. receive, der dividends, ann	mand, sue for and recover all nuities, proceeds of insurance,	l property—real or personecoveries—that are no	onal, claims, deb w due or may her	eafter become due; 🥰 c	, <u> </u>
4. adjust, com	promise, and execute releases	s, therefore, as my attorn	ey shall deem fit;		
5. to make, ex	ecute, and deliver any deed, n	mortgage or lease in resp	ect of any of my		
6. to buy, sell,	trade, mortgage, hypothecate		roperty of any kin	d or nature;	
7. to execute, subdivision the	file, examine, and request or ereof, whether filed by me, or		ax returns require property	ed by the United Stat	e or any politica
8. to transact protect or prom	any and all business for me note my business or property,	and to do such other a	cts as may be ne	cessary or desirable to	be done to save t.
Furthermo shall continue i	ore, this Power of Attorney shin effect until revoked by me i	nall not be affected by suin writing.	bsequent disabilit	y, or incapacity, or by	lapse of time, an
And I do I this power of at	hereby ratify and confirm all ttorney.			shall do or cause to be	done by virtue o
State of Indian	na, County of Lake	Signal Signal	ture f		
Before me	e, the undersigned, a Notary F	Public in and for said Co	ounty this date	October 9	20.03
came,			5		ed the execution
of the foregoing	Hawry Matasar	SEAL.		, and acknowledg	ged the execution
	y hand and official seal.	WDIANA	IIII		
			-1/1.		_
iviy (zoruzussion	expires _ <u>May 22, 20</u>	Signature	avid H	(Jotary Public
		Da	vid A. Rei	nbold (Pi	rinted)
This instrument	prepared by: David_A	Reinbold	Resident o	_Lake	rinted) County