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**POWER OF ATTORNEY  
FOR TRANSFER OF REAL ESTATE**

I, **Theresa Marie Lyerla**, the undersigned, hereby appoint my son, **Manuel Robert Lyerla**, as my true and lawful attorney-in-fact.

I appoint said attorney-in-fact to do and perform for me and in my name and carry out every act that my attorney-in-fact deems necessary and proper to protect and promote my interests and affairs as fully and effectively as I would do myself if present and able to do so.

1. My attorney-in-fact shall have the following powers set forth in the Indiana Power of Attorney Act and incorporated herein by reference:

A I.C. 30-5-5-2. General authority with respect to real property.

(a) I specifically empower Manuel Robert Lyerla to act fully in my stead regarding real property commonly known as:

6949 Alabama Avenue  
Hammond, Indiana 46323

and more specifically described as:

Strange @ Rumsey's Add. S.. 17 ft L. 10 Bl. 1.

B. I.C. 30-5-5-3. General authority with respect to tangible, personal property.

It is my intention that this document comply with the Indiana Power of Attorney Act I.C. 30-5-1-1, I.C. 30-5-5-2 and I.C. 30-5-5-3, and that my attorney-in-fact shall have all the rights given to her by said laws to act for me in the event I am unable to act for myself or in my absence.

IN FURTHERANCE OF THESE POWERS I give my attorney-in-fact power and authority to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of this instrument, as fully as I could do personally for myself, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument.

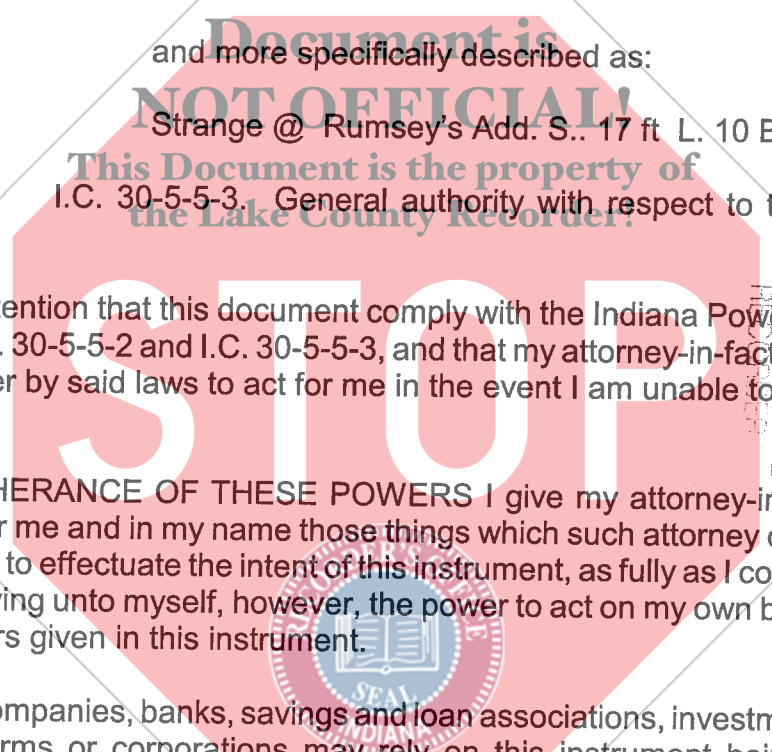
Any title companies, banks, savings and loan associations, investment firms, and other persons, firms or corporations may rely on this instrument being in effect and unrevoked by me unless I shall have executed a proper instrument of revocation and delivered it, or caused it to be delivered, to such person, firm or corporation.

This Power of Attorney shall not be affected by my subsequent disability or

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Handwritten signature/initials: *dm*

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FILED  
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STEPHEN R. STIGLICH  
LAKE COUNTY AUDITOR

incapacity, nor by lapse of time, it being my intention that this instrument constitute a durable power of attorney under the Indiana Power of Attorney Act of 1991.

Signed this 17<sup>th</sup> day of August, 2004.

Theresa Marie Lyerla  
GRANTOR, Theresa Marie Lyerla

Grantor's Social Security No.: 310-52-2985

Grantor's Address: 6949 Alabama Avenue  
Hammond, Indiana 46323

STATE OF INDIANA        )  
                                      ) SS:  
COUNTY OF LAKE        )

Before me, the undersigned, a Notary Public in and for said County and State, this 17<sup>th</sup> day of August, 2004 personally appeared the Grantor named above, and acknowledged the execution of this Power of Attorney to be the voluntary act and deed of the Grantor, for the uses and purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above written.

Frank R. Martinez, II  
Notary Public  
Resident of Lake County

My Commission Expires: 5/1/09

This instrument prepared by: KENNETH L. ANDERSON, Attorney at Law  
9105 Indianapolis Boulevard  
Highland, Indiana 46322

