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Durable Power of Attorney

And Nomination of Conservator

Warning to Person Executing this Legal Document

○ **B**efore

This is an important legal document. It creates a durable power of attorney. executing this document, you should know these important facts:

This document may provide the person you designate as your attorney-in-fact with broad powers to dispose, sell, convey, and encumber your real and personal property.

2. These powers will exist for an indefinite period of time. These powers will continue to exist notwithstanding your subsequent disability and incapacity.

3. You have the right to revoke or terminate this durable power of attorned at any time.

1. Designation of Agent. I, Michael Halik, residing at 1307 Davis Avenue, City of Whiting, State of Indiana, do hereby appoint Evelyn A. Halik, whose address is 1307 Davis Avenue, as my attorney in fact to act for me and in my name as authorized in this document. If my first designee is unable to serve or declines to serve, I nominate Bonnie Jill Kekelik, whose address is 28780 Grove Ln., Warrenville, IL 60555 to so acr as my attorney in fact.

the Lake County Recorder!

- 2. Creation of Durable Power of Attorney. By this document, I intend to create a general power of attorney under the laws of the State of Indiana. Subject to the limitations in this document, this power of attorney is a durable power of attorney and shall not be affected by my subsequent incapacity.
- 3. Statement of Authority Granted. Subject to the limitations in this document, I hereby grant my agent full power and authority to act for me and in my name in any way which I myself could act, if I were personally present and able to act, with respect to the following matters as each of them is defined and construed by the laws of the State of Indiana.
 - (1) Real estate transactions.
 - (2) Tangible personal property transactions
 - (3) Bond, share, and commodity transactions.
 - (4) Financial institution transactions.

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STEPHEN R. STIGLICH LAKE COUNTY AUDITOR

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Business operating transactions. (5) (6) Insurance transactions. **(7)** Retirement plan transactions. Estate transactions. (8) (9) Claims and litigation. (10) Tax matters. (11) Personal relationships and affairs. (12) Benefits from military service. (13) Records, reports, and statements. (14) Full and unqualified authority to my agent to delegate any or all of the foregoing powers to any persons whom my agent shall select. (15) All other matters. Duration: This power of attorney shall exist for an indefinite period of time. 5. Nomination of Conservator of Estate. If a conservator of the estate is to be appointed for me, I nominate Evelyn A. Halik, whose address is written herein above, to serve as my conservator. Date and Signature of Principal I sign my name to this Power of Attorney on this <u>lo</u> day of <u>c</u> while , State of Indiana.

Statement of Witnesses

I declare under penalty of perjury under the law of the State of Indiana that the person who signed or acknowledged this document is personally known to me (or proved to me on the basis of convincing evidence) to be the principal, that the principal signed or acknowledged this power of attorney in my presence, and that the principal appears to be of sound mind and under no duress, fraud, or undue influence.

sound mand and under no duvess, man	d, or undue influence.		
Idea C. Dar	_ (Witness Signature)	9-10-93 Dat	te
DAVIA C. WIL	_ (Print Name)		
927 Max WELL CT	_ (Address)		
927 May WELL CT Crown Pourt IN 46307	_ (City, State, Zip Code))	
Enely a Hacita	(Witness Signature)	9-10-93 Dat	e
EVELYN A HALPING			
1307 DAVIS AU.	(Address)		
WH, TING-IN. 146 BAY	ent is the propert (City, State, Zip Code)		
Certificate of Acknowledge	owledgement of Not	ary Public	
State of Indiana			
County of Lake			
On this 10 day of 15	usy A.D. 19	appeared before me Micha f satisfactory evidence) to l	ıel
Halik personally known to me (or prov	ved to me on the basis of	f satisfactory evidence) to l	be
the person whose name is subscribed	in this instrument, and	d acknowledged that he/sl	ne
executed it.			
_ Wind (. Jour	Residing in CO	wa fout IN	
Notary Public		de	
The state of the s	Onem Exp	3146197	
NOTARY SEAL			