## POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, JANA L. PARRISH-SANCHEZ, of Lake County, Indiana, have made, constituted and appointed, and by these presents do make, constitute and appoint CINDY L. SANCHEZ, of 2620 - 39th Place, Highland, Lake County, Indiana, my true and lawful attorney, for me and in my name, place and stead to sell, purchase, convey, assign and transfer any and all real estate; to sign, execute, acknowledge, receive and deliver in my name all forms and documents, including but not limited to deeds, relative to sale or purchase of such, and more particularly described as:

Legal Description :

Lot 19 in Block 4 in the resubdivision of Blocks 13, 14, 15; Lots 12 to 30 in Block 16 and Blocks 17, 26, 3 and 28 in that part of East Chicago lying in the Southwes 1/4 of Section 29, Township 37 North, Range 9 West of the 2nd P.M., as per plat thereof, recorded in Plat Book 5, Page 27, in the Office of the Recorder of Lake County,

Indiana

Commonly Known As :

1116 Beacon Street
East Chicago, Lake County, Indiana

hereby giving and granting to my said attorney full power and authority to do and perform all and every act and thing whatsoever necessary to be done in the premises, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution and revocation hereby ratifying and confirming all that my said attorney may do pursuant to this power.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this

January, 2006.

PARRISH-SANCHEZ

STATE OF INDIANA

COUNTY OF LAKE

PEGGY HOLINGA KATONA

Before me the undersigned notary public, in and for said County and State, this 27 day of January, 2006, personally appeared JANA L. PARRISH-SANCHEZ, and acknowledged the execution of the foregoing Power of Attorney.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires: 11/19/09 County of Residence : Lake

HOLD FOR THE TALON GROUP 1319250

002556

Prescribed by the State Board of Accounts (2005)

## **DECLARATION**

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm under the penalties of perjury:

- I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers;
- I have redacted, to the extent permitted by law, each Social Security number in the attached document. 2.

I, the undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Date: 1.27.06

nature of Declarant