STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2006 086473

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LIMITED POWER ØFATTORNEÝWN (REAL ESTATE)

P.
I/We, Randy Hacker
<u>Lake</u> County, State of <u>Indiana</u> , being at least 18 years of age and mentally competent, do
hereby designate Dawn Grutzius
of <u>Lake</u> County, State of <u>Indiana</u> , as my true and lawful attorney-in-fact.
1. POWERS AND PURPOSES
The above named attorney-in-fact shall have authority with respect to real property transactions pursuant to Ind. Code S 30-5-2, pertaining to the transaction of the real estate described below, situated in <u>Lake</u> County, State of <u>Indiana</u> :
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Condominium Unit No. 301, Building A, in Windimere Arms, a Horizontal Property Regime, as per Declaration of Horizontal Property Ownership, recorded July 24, 1986 as Document Nos. 865923 and 865924, and as amended in the Office of the Recorder of Lake County, Indiana, together with the undivided interest in the common elements appertaining thereto.
NOT OFFICIAL!
the address of such real estate is commonly known as9621 Merrillville Rd. Unit #301, Crown Point, IN 46307, (the "Real Estate") and shall be construed so as to effectuate this purpose. This authority shall include, by way if illustration and not limitation, the power:
To make, draw, and endorse promissory notes, checks or bills or exchange pertaining to the Real Estate and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments.
To make and execute any and all contract pertaining to the Real Estate;
To receive and to demand all sums of money, debts, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to comprise, settle or discharge the same;
To bargain for, contract concerning, buy, sell, encumber and in anyway and manner, deal with personal property located upon pertaining to the Real Estate; and
To execute any and all documentation necessary to effectuate the transactions described above, including, but not limited to closing statements, instruments of conveyance and supporting documentation, certifications, acknowledgments, and like instruments.

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II. EFFECTIVE DATE AND TERMINATION

A.	This power of attorney shall be effective: (Select appropriate provision)	
ø	as of the date it is signed	
X	as of the <u>28th</u> day of <u>Sept.</u> , 20 <u>06</u>	
	upon the determination that I am disabled or incapacitated, or no longer capable of managing my affairs prudently. My disability or incapacity, for this purpose, may be established by the certificate of a qualified physician stating that I am unable to manage my affairs.	
B.	My disability or incompetence (select appropriate provision): (shall not) affect or terminate this Power of Attorney.	
C.	This Power of Attorney shall terminate: (select appropriate provision)	
	upon my incapacity	
	upon theday of, 20	
対	upon the execution and recordation with the Recorder's Office of the County where the Real Estate is located a written revocation hereof.	
III.	RATIFICATION AND IDENTIFICATION OFFICIAL!	
I/We hereby ratify and confirm that all my attorney-in-fact shall do by virtue hereof. Further, I/We agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts with my attorney-in-fact in reliance upon this Power, without actual knowledge of its revocation.		
IN WITNESS WHEREOF, I/WE have hereunto set my/our hand(s) and seal(s) this		
PRI	NTED: Zandy Hacker PRINTED:	
STA	Randy P. Hacker) SS:	
COU	INTY OF LAKE)	
	Before me a Notary Public in and for sai County and State, personally appeared RANDY HACKER and who acknowledged the execution of the foregoing Power of Attorney,	
and	d who, having been duly sworn, stated that any representations therein contained are true.	
	WITNESS my hand and NOTARIAL seal, this 25th day of 357757150 , 2096	
Prin	ited: Down 2150FF Notary Public Notary Publi	
My County of Residence: LAKE My County of Residence:		
This instrument was prepared by Randy P. Hacker		