

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2008 015461

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MICHAEL A. BROWN
RECORDER

**REVOCATION AND NOTICE OF REVOCATION OF
LIVING WILL DECLARATION, HEALTH CARE DURABLE POWER OF ATTORNEY,
APPOINTMENT OF HEALTH CARE REPRESENTATIVE and DURABLE POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS that I, ROBERT T. DOHERTY, hereby revoke unconditionally and for all purposes that certain Living Will Declaration, Health Care Durable Power of Attorney, Appointment of Health Care Representative and Durable Power of Attorney given by me, to my dear and trusted friend, JENNIFER A. PAZANIN, as my Health Care Representative and/or Attorney-in-Fact and to my trusted friend, JAMES B. OLSEN, JR., as successor Health Care Representative and/or Attorney-in-Fact, dated and acknowledged on August 2, 2004, but unrecorded.

This instrument shall serve as notice to all interested persons and to the world that the aforesaid documents are now revoked, void, of no further force and effect, and that I will no longer be bound by any thing, act or deed done for me, on my behalf or in my name, place or stead under the authority of said documents.

WITNESS my hand this 26th day of February, 2008.

Robert T. Doherty

ROBERT T. DOHERTY

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

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Before me, the undersigned, a Notary Public in and for Lake County, State of Indiana, personally appeared ROBERT T. DOHERTY and acknowledged the execution of the above and foregoing instrument this 26th day of February, 2008.

My Commission Expires:
09/13/2009

Jessica A. Pavlakis

Jessica A. Pavlakis - Notary Public
Resident of Lake County

**I affirm under the penalties for perjury that I have taken reasonable care to redact
each Social Security Number in this document, unless required by law.**

Michael D. Dobosz, Attorney at Law



THIS INSTRUMENT PREPARED BY:

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