

STATE OF INDIANA
LAKE COUNTY
PUBLIC RECORDS

2008 062297

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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, JUDITH L. TROST, 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 husband, ROBERT E. TROST, as my Health Care Representative and/or Attorney-in-Fact and to my son, JEFFREY A. HUFFMAN, as successor Health Care Representative and/or Attorney-in-Fact, and to my grandson, CHARLES RILEY, JR., as second successor Health Care Representative and/or Attorney-in-Fact, dated and acknowledged on May 10, 2006, 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 20th day of August, 2008.

Judith L. Trost

JUDITH L. TROST

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Document
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the Lake County Recorder

Before me, the undersigned, a Notary Public in and for Lake County, State of Indiana, personally appeared JUDITH L. TROST and acknowledged the execution of the above and foregoing instrument this 20th day of August, 2008.

My Commission Expires:
04/27/2016

Kathryn M. Murphy

Kathryn M. Murphy - 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.

William J. Cunningham, Attorney at Law



THIS INSTRUMENT PREPARED BY:

William J. Cunningham, Esq. (#3471-45)

HILBRICH CUNNINGHAM SCHWERT DOBOSZ & VINOYICH, LLP

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