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OF ONALD K. STASH

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PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

ARTICLE I DESIGNATION OF AGENT

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I, **Donald K. Stash**, of Lake County, State of Indiana, being an adult and mentally competent, do hereby designate and appoint **Doris M. Leaf** of Lake County, State of Indiana, as my true and lawful Attorney-in-Fact, hereinafter sometimes referred to as any Agent, giving my Agent full authority and power to make financial, asset management, and personal decisions for me in my name, place and stead as authorized in this document.

ARTICLE II GENERAL ASSET AND FINANCIAL POWERS

My Attorney-in-Fact is authorized, in her sole and absolute discretion from time to time and at any time until December 1, 2008, with respect to any and all of my property and interests in property, real, personal and mixed, and matters affecting my financial and personal interests, by way of illustration and not intending any limitation, to proceed on my behalf as stipulated under the following sections of the Indiana Code governing Powers of Attorney, namely:

This Document is the property of

I.C. 30-5-5-2 the Conferring general authority with respect to real property transactions. I.C. 30-5-5-3 Conferring general authority with respect to tangible personal property transactions. I.C. 30-5-5-4 Conferring general authority with respect to bond, share and commodity transactions. I.C. 30-5-5-5 Conferring general authority with respect to banking transactions. I.C. 30-5-5-6 Conferring general authority with respect to business operating transactions. I.C. 30-5-5-7 Conferring general authority with respect to insurance I.C. 30-5-5-8 Conferring general authority with respect to beneficiary I.C. 30-5-5-9 Conferring general authority with respect to gift transactions. I.C. 30-5-5-10 Conferring general authority with respect to fiduciary Conferring general authority with respect to claims and I.C. 30-5-5-11 litigation. I.C. 30-5-5-12 Conferring general authority with respect to family maintenance.

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I.C. 30-5-5-13	Conferring general authority with respect to benefits from military service.
I.C. 30-5-5-14	Conferring general authority with respect to records, reports, and statements.
I.C. 30-5-5-15	Conferring general authority with respect to estate transactions.
I.C. 30-5-5-16	Conferring general authority with respect to health care powers.
I.C. 30-5-5-17	Conferring general authority with respect to withdrawing or withholding of medical treatment on behalf of the principal.
I.C. 30-5-5-18	Conferring general authority with respect to delegating authority.
I.C. 30-5-5-19	Conferring general authority with respect to all other matters.

I hereby incorporate by reference all the powers granted an Attorney-in-Fact under Indiana Code Sections I.C. 30-5-5-2 through I.C. 30-5-5-19 and grant these powers to **Doris M. Leaf** until December 1, 2008.

ARTICLE III PROVISION APPLICABLE TO ARTICLE II

With respect to Article II (general asset and financial powers), it is to be understood that the authority I have conferred to my Attorney-in-Fact in no way is intended to limit or restrict my own authority or decision making capabilities covering such powers and authority as long as I remain mentally competent.

Furthermore, this power of attorney and the authority I have conferred and specified under Article II above shall remain effective in the event that I become disabled or legally incapacitated to act on my own behalf.

ARTICLE IV THIRD PARTY RELIANCE

No person who relies in good faith upon any representations by or authority of my Attorney-in-Fact, shall be liable to me, my estate, my heirs or assigns for recognizing such representations or authority.

ARTICLE V MISCELLANEOUS PROVISIONS

- 1. This durable power of attorney is intended to be valid and given full faith and credit in any jurisdiction or state in which it is presented.
- 2. My Attorney-in-Fact shall not be entitled to any compensation for services performed hereunder, but shall be entitled to reimbursement for all reasonable expenses incurred and paid, including transportation costs, as a result of carrying out any provisions of this instrument.

- 3. My Attorney-in-Fact, including heirs, legatees, successors, assigns, personal representatives and estate, acting in good faith hereunder, are hereby released and forever discharged from any and all liability, (including civil, criminal, administrative or disciplinary) and from all claims or demands of all kinds whatsoever by me or my heirs, legatees, successors, assigns, personal representatives or estate, arising out of the acts or omissions of my Attorney-in-Fact, except for willful misconduct or gross negligence.
- 4. My Attorney-in-Fact is authorized to make photocopies of this instrument as frequently and in such quantity as he or she shall deem appropriate. Each photocopy shall have the same force and effect as any original.
- 5. In any part or provision of this instrument shall be invalid or unenforceable, such part or provision shall be ineffective to the extent of such invalidity or unenforceability only, without in any way affecting the remaining parts or provisions of this instrument.
- 6. This instrument, and actions taken by my Attorney-in-Fact properly authorized hereunder, shall be binding upon me, my heirs, successors, assigns, legatees, guardians and personal representatives.

IN WITNESS WHEREOF, I have hereunto executed this Durable Power of Attorney this Attorney this Attorney this 2008.

Documen Donald K. Stash

NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

STATE OF INDIANA

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COUNTY OF LAKE

Before me, the undersigned, a Notary Public, in and for said County and State, this 19 day of 2008, personally appeared Donald K. Stash, and acknowledged the execution of the foregoing General Durable Power of Attorney. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Signature of Notary Public

Printed name of Notary Public

County of Residence

My Commission Expires: