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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

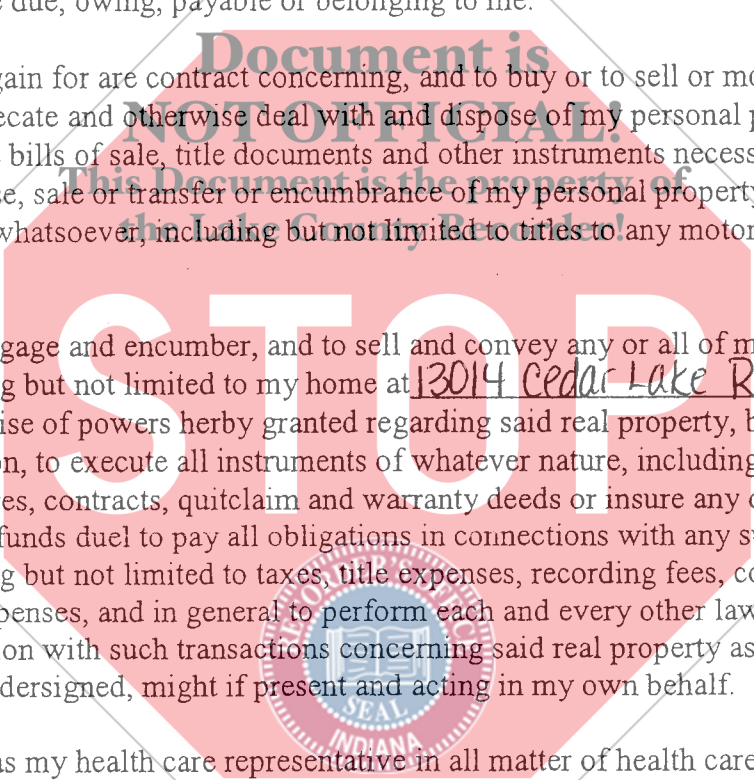
DURATION POWER OF ATTORNEY

2009 APR 20 AM 11:14

MICHAEL A. BROWN
RECORDER

I, Virgil E. Mathias of Lake Co., IN
constitute and appoint, Sherry L. Pagel, of Porter Co., IN
my true and lawful attorney-in-fact, for me and in my name, place and stead to do and perform
each and every act hereinafter set forth, to wit;

1. To draw checks and drafts against any checking or savings or other accounts standing in my name, making the same payable to said POA as my attorney, or others; and to endorse checks and drafts and make deposits in any such account or other accounts.
2. To purchase, or sell, assign, pledge or otherwise deal with and dispose of notes, stocks, bonds, certificates of deposits and other securities standing in my name.
3. To demand and to receive all sums of money, debts, dues, accounts, interests, dividends, annuities and other demands whatsoever as are now or shall hereafter become due, owing, payable or belonging to me.
4. To bargain for are contract concerning, and to buy or to sell or mortgage or hypothecate and otherwise deal with and dispose of my personal property; and to execute bills of sale, title documents and other instruments necessary for the purchase, sale or transfer or encumbrance of my personal property of any kind or nature whatsoever, including but not limited to titles to any motor vehicles owned by me.
5. To mortgage and encumber, and to sell and convey any or all of my real property, including but not limited to my home at 13014 Cedar Lake Rd. Crown Point IN
In exercise of powers herby granted regarding said real property, but not by way of limitation, to execute all instruments of whatever nature, including assignments, mortgages, contracts, quitclaim and warranty deeds or insure any defects in title; to receive funds duel to pay all obligations in connections with any such transactions, including but not limited to taxes, title expenses, recording fees, commissions and legal expenses, and in general to perform each and every other lawful act in connection with such transactions concerning said real property as effectively as if I, the undersigned, might if present and acting in my own behalf.
6. To act as my health care representative in all matter of health care. This appointment is to be exercised in good faith and in my best of interests and shall become effective and remain effective only if I am incapable of consenting to my health care. My attorney, acting as my health care representative, may not delegate decision-making powers to any other person.
7. Generally, to transact any and all business for me of any kind or nature whatsoever and to do and perform each and every act and thing whatsoever requisite, necessary, proper or helpful to be done in all matters affecting my business or real



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and personal property, all with the same force and effect as though I were personally present and acting for myself, and I hereby ratify and confirm al that my said attorney-in-fact shall do by virtue of this Durable Power of Attorney.

- 8. This is a durable power of attorney pursuant to I.C. 30-2-11-1; et seq., as amended, and shall not be affected by my subsequent disability or incapacity, or the lapse of time, and notwithstanding and uncertainty as to whether I am deceased or living. In the event it is necessary to appoint a guardian for my person or estate, I request the appointment of Sherry L. Pagel.

Signed this 4th day of April, 2009, before the person named below, as witness, who has duly witnessed my signing of this instrument.

Virgil E. Mathias
(Grantor)

"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."

Document is NOT OFFICIAL!

PREPARED BY: pen This Document is the property of the Lake County Recorder! (Witness)

STATE OF INDIANA, COUNTY OF LAKE, SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared Virgil E. Mathias, who acknowledged the execution of the above and foregoing Durable Power of Attorney.

WITNESS MY HAND AND Notarial Seal this 4th day of April, 2009

Sarah L. Pagel

Commission Expires: 9-25-2016



Country of Residence: Lake County, Indiana
United States

After Recording
return to:
Sherry L. Pagel
2357 Sweet Briar Lane
Valparaiso IN 46383
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