



I affirm under the penalties of perjury that the foregoing statements are true.

Lynn L. Blastick  
LYNN L. BLASTICK, AFFIANT

9/16/2009  
DATE

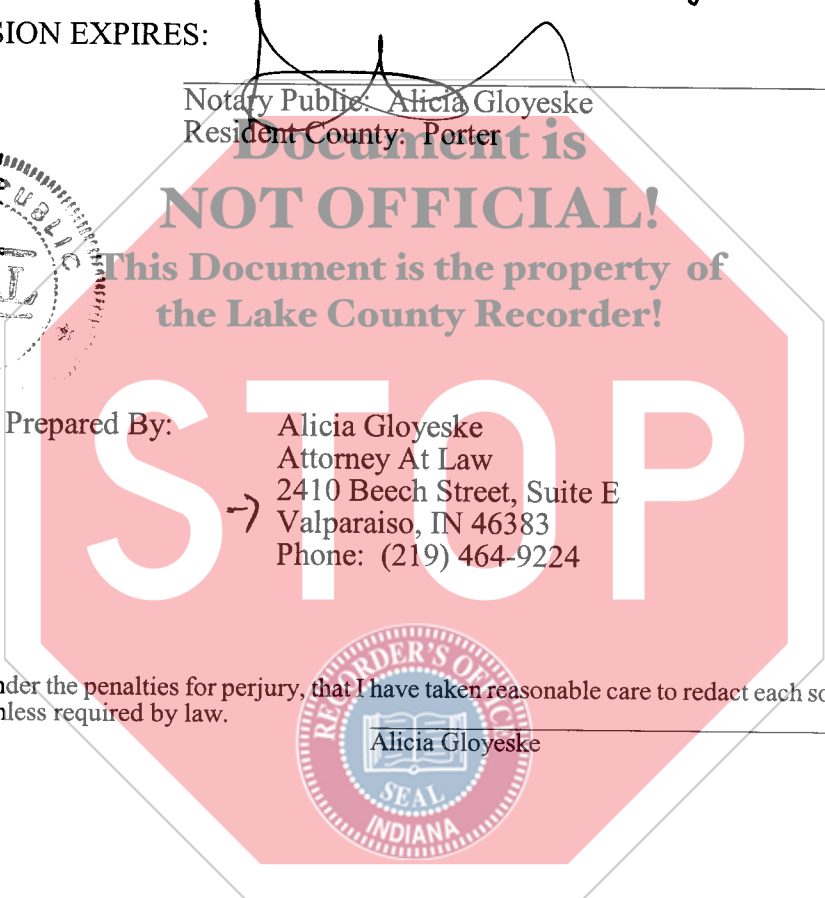
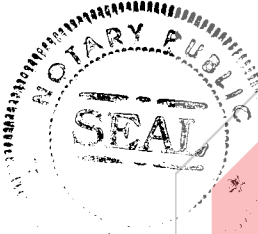
STATE OF INDIANA        )  
  ) SS:  
COUNTY OF LAKE        )

Before me, a Notary Public in and for said County and State, personally appeared LYNN L. BLASTICK, who acknowledged the execution of the foregoing Affidavit and acknowledged her execution of it as her voluntary act and deed for the uses and purposes stated in it.

WITNESS my hand and Notarial Seal, this 16 day of Sept, 2009.

MY COMMISSION EXPIRES:  
3-30-17

Alicia Gloyeske  
Notary Public: Alicia Gloyeske  
Resident County: Porter



This Instrument Prepared By:

Alicia Gloyeske  
Attorney At Law  
2410 Beech Street, Suite E  
Valparaiso, IN 46383  
Phone: (219) 464-9224

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.

