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**OF** 

ANITA RAY (GRANTOR)

(AS CO-TRUSTEE OF THE ANN SKERTICH REVOCABLE LIVING TRU AND AS GUARDIAN)

TO

## KATHLEEN SKERTICH WENDELL (ATTORNEY-IN-FACT)

The undersigned Anita Ray hereby nominates, constitutes and appoints Kathleen Skezich Wendell as my true and lawful durable special and limited Attorney-in-Fact (not intending hereby to grant or confer general authority pursuant to I.C. §30-5-5) to do and perform for me and in my mame, only the following:

All acts, as specified in Paragraphs 2 and 3 below, relating to the closing of the reverse mortal acts. with Wells Fargo Bank, which real estate is described as:

All that certain piece or parcel of land situated in the Town of Highland, Lake County, Indiana, in the Northwest Quarter (NW 1/4) of the Northeast Quarter (NE 1/4) of Section Thirty-Three (33) Township Thirty - six (36) North, Range Nine (9) West of the Second Principal Meridian, and being known as Lot Thirty-seven (37) as marked and laid down on the plat of the Eric Subdivision No. 1 of Industrial Center land Company, filed in Plat Book 26 at Page 36 of Lake County Map Records, containing one and eighty - one thousandths (1.081) acres, more or less.

Parcel No.: 007-16-27-0182-0013

Commonly known as: 2920 East 45th Street, Highland, IN 46322

- 2. The powers granted hereby include (a) the execution on by behalf of closing statements, tax agreements, title affidavits and any and all other documents and papers relating to said closing; (b) to otherwise deal with the title to said real estate, respecting the sale of same, as long as said Attorney-in-Fact shall provide to me an accounting of same, and (c) to otherwise act on my behalf as a party to the agreement to sell real estate.
- In furtherance of the foregoing enumerated powers, Fgive my Attorney-in-Fact power and 3. authority to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the special and limited powers granted and conferred by this instrument, as fully as I could do personally for myself, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument.

My Attorney-in-Fact shall serve and exercise the so yers granted and conferred hereby, without 4. reimbursement for expenses advanced and without ee for services rendered, as may be PEGGY HOLINGA KATONA otherwise required by I.C. §30-5-4-5.

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Any act or thing lawfully done by my Attorney-in-Fact under this instrument shall be binding on me and on my heirs, assigns and legal representatives.

Persons to whom this instrument may be delivered may rely on its being in effect and unrevoked unless I shall have executed a proper instrument of revocation and recorded it, or caused it to be recorded, in the Office of the Recorder of Newton County, State of Indiana, or unless I shall have died or have been judicially declared incompetent.

I executed this instrument on the \_\_\_\_\_ day of December, 2009, consisting of 1 counterparts, of which this is as Co-Trustee of the Ann Skertich Revocable STATE OF Jexas The undersigned, a Notary Public in and for the above County and State, residing in while amsen COUNTY OF Williamson, SS: County, Texas, certifies and witnesses that the above signed individual, who is personally know to me to be the same person whose name is Ocum subscribed to this instrument, appeared before me in person and acknowledged his/her signature and delivered the instrument as a free and voluntary ument is act, for the uses and purposes named in the instrument AMY LLORENS the Lake Count July 11, 2012 Date: December 4th My Commission Expires: July 11 Resident of Williamson County, Texas ATTESTATION: The Attorney-in-Fact represents and warrants that within her knowledge this power is unrevoked and is still in full force and effect as of this 18th day of December , 2009, upon each and every exercise of the powers herein granted. Attorney-in-Fact, Kathleen Skertich Wendell Prepared by Anita Ray l 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.