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Thomas L. Melcic

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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 MAR 25 AM 9: 19

MICHELLE R. FAJMAN RECORDER

DURABLE POWER OF ATTORNEY OF CONSTANCE MELCIC TO

THOMAS L. MELCIC

626100646

I, as principal, designate and name the person whose name appears above to be my attorney in fact.

A. **Powers.** According to the Statute, an attorney in fact has a power granted under I.C. 30-5-5 if the power of attorney incorporates the power. Therefore, by referring to the language of the Statute describing powers, this Power of Attorney incorporates into it the powers here listed and confers general authority with respect to them:

real property transactions;	[I.C. 30-5-5-2]
tangible personal property transactions;	[I.C. 30-5-5-3]
bond, share, and commodity transactions;	[I.C. 30-5-5-4]
retirement plan powers/authorities FICIAI!	[I.C. 30-5-5-4.5]
banking transactions:	[LC. 30-5-5-5]
business operating transactions; t is the property	of [I.C. 30-5-5-6]
insurance transactions; ake County Recorder!	[I.C. 30-5-5-7]
beneficiary transactions;	[I.C. 30-5-5-8]
gift transactions;	[I.C. 30-5-5-9]
fiduciary transactions;	[I.C. 30-5-5-10]
claims and litigation;	[I.C. 30-5-5-11]
family maintenance	[I.C. 30-5-5-12]
benefits from military service;	[I.C. 30-5-5-13]
records, reports, and statements;	[I.C. 30-5-5-14]
estate transactions;	[I.C. 30-5-5-15]
all other matters;	[I.C. 30-5-5-19]

Though the statue, above referenced, grants, allows and provides for powers with respect to health care (I.C. 30-5-5-16, 30-5-5-17 and 30-5-5-18), this Power of Attorney specifically does not include them.

I do specifically amend, modify, supplement and add to the above designate powers as follows: To take such action, and make such elections and choices, regarding, and in relation to, any stock brokerage accounts or funds in my name, either alone, solely or with others; and to take such action or to apply such funds, without petition to or leave of court, for the purpose of conserving my property, benefiting my descendants and other relatives, and maximizing entitlements to federal and state medical, welfare, housing and other public programs, by all legitimate and proper means within the sound and trusted discretion of my attorney-in-fact, including, but not limited to, the power to make gifts to such relatives, friends and charities as would likely be the recipients of donations or gifts from me, make investments and purchases including the investment in annuities, bonds, stocks or other vehicles and the purchase of real estate or other assets, to make revocable or irrevocable transfers into trusts for the benefit of myself or other said recipients, and to take such steps even though my attorney-in-fact is a member of the group that may benefit under such an estate plan.

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Z AO CT IN FURTHERANCE OF THESE POWERS, I give my attorney in fact power to act on my behalf and to do for me and in my same those things which such attorney deems expedient to and necessary to effectuate the intent of this Power of Attorney, as fully as I could do for myself.

- A. **Reservation of Power to Act and to Revoke.** I reserve unto myself, however, the power to act on my own behalf and also to revoke or amend this Power of Attorney.
- B. Chapters of Statute Also Applicable. The following chapters of the Statute also apply to this Power of Attorney and acts performed under it:

Definitions [I.C. 30-5-2] General Provisions [I.C. 30-5-3] Duties [I.C. 30-5-6] Reliance [I.C. 30-5-8] Liabilities [I.C. 30-5-9] Termination [I.C. 30-5-10]

C. Liability of Attorney in Fact. As permitted by I.C. 30-5-9-5, I, as principal, specifically provide that my attorney in fact is liable only if my attorney in fact acts in bad faith.

D. Reliance on Power of Attorney. In addition to provisions of the Statute regarding reliance, any bank, holding institution or financial institution may rely on this Power of Attorney being in effect unless I shall have executed a proper written document revoking or changing it and delivered, or caused to be delivered, to such bank, holding institution or financial institution.

All other persons to whom this Power of Attorney may be delivered may rely on its being in effect unless I shall have executed a proper instrument revoking or changing it and recorded such instrument, or caused it to be recorded, in the Office of the Recorder Lake County, State of Indiana.

E. **Duration of Power of Attorney.** This Power of Attorney shall not be effected by my subsequent disability or incapacity, nor by lapse of time, it being my intention that this instrument constitute a durable power of attorney under the Indiana Uniform Durable Power of Attorney Act. This Power shall not be effected by the delay in recording.

Notwithstanding anything herein to the contrary this Power shall automatically terminate and become null and void upon the death of the undersigned Grantor.

- F. **Revocation of Prior Powers.** I revoke all powers of attorney I signed before the date of this Power of Attorney. Revocation does not affect the validity of an act performed under a prior power of attorney. In case of failure to strike, prior powers are revoked.
- G. **Guardians.** If protective proceedings, for my person or for my estate, or for both, are commenced, I nominate Thomas L. Melcic, as guardian of my person, and Thomas L. Melcic, as guardian of my estate, to serve in each case without bond as may be permitted by law.

By giving me written notice while I am not incapacitated, my attorney in fact may resign or decline to serve. During a period of my incapacity, my attorney in fact, shall

0.90 9-28-04 continue to serve until a successor attorney in fact is authorized to act under this Power of Attorney, whether designated and named in this Power of Attorney as such successor or selected by a court of competent jurisdiction to be such successor.

- H. **Binding Effect.** Any act or thing performed by my attorney in fact under this Power of Attorney binds me and my successors in interest, as the Statute provides.
- I. Successor Attorney in Fact. As a successor to my attorney in fact I designate and name Frank Melcic.

Signed this 28th day of September, 2007, in three (3) counterparts, each of which shall be considered an original.

Counterpart No. Two (2)

Constance Melcie

Docum CONSTANCE MELCIC

NOT OFFICIAL ADDRESS

Dyer, Indiana 46311

This Document is the CITY PSTATE AND ZIP CODE

the Lake County Recorder!

STATE OF INDIANA

COUNTY OF LAKE

SS.

Before me, the undersigned, a Notary Public in and for said County and State, this 28th day of September, 2007, personally appeared the principal named above, signed this Power of Attorney, and acknowledged the execution of it, as the voluntary act and deed of the principal, for the uses and purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above written.

Notary Signature

Kenneth A. Manning
Notary Name Printed

My Commission Expires: 12-12-2012

Resident of Lake County

Instrument prepared by: Kenneth A. Manning, Attorney No: 9015-45, 200 Monticello Drive, Dyer, Indiana 46311, 219-865-8376.

AUTHORIZED AGENT ACCEPTANCE

Each of the undersigned hereby acknowledges the above appointment of himself, herself, or itself as authorized agent for Constance Melcic, (hereafter "the principal"), accepts the same, acknowledges that he or she is at least 18 years of age or that it is a bank or trust company having trust powers, acknowledges receipt of a photocopy of this power of attorney and appointment of authorized agent, and agrees (1) to be bound by the same, (ii) to act in good faith in the best interest of the principal and his estate and those interested in his estate (without discriminating among them), and (iii) to follow the desires, instructions, guidelines, and preferences of the principal as from time to time expressed by the principal (in writing, orally, or as otherwise communicated to the undersigned by the principal). If the initially designated authorized agent (or then acting successor) is unavailable to act after reasonable effort to contact him, her, or it has been made, he she, or it hereby delegates his, her, or its authority to the next person the principal has appointed as successor authorized agent (in the order appointed). Such next appointed successor authorized agent who is available is authorized and agrees to act until the initially appointed authorized agent (or then acting successor) becomes available.

Certification of SS#: _339-24-9374	Initially Designated Authorized Agent: Thomas L Molin
Constance Melcic	THOMAS L. MELCIC
CONSTANCE MELCIC Date: 7-28-07	Address: 8935 Richards Street
	Highland, Indiana 46322
	Phone (H) <u>219-838-5150</u> (W)

When recorded, return to:

Name of each county in which recorded (if recorded)