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# Power of Attorney of Carl E. Grose

BY THIS POWER OF ATTORNEY, I, **CARL E. GROSE**, name an attorney-in-fact with power to act on my behalf pursuant to Ind. Code § 30-5, as it exists now and is amended in the future.

As my attorney-in-fact, I name **ATTORNEY THOMAS C. HIGGINS** whose address and telephone number are: 4601 Rutland Road, Valparaiso, IN (219) 465-1058.

**LIABILITY LIMITED.** My attorney-in-fact shall only be liable for actions undertaken in bad faith except if my attorney-in-fact is involved in self-dealing. The attorney in fact shall use due care to act for the benefit of the principal under the terms of the power of attorney.

**NO FEE.** My attorney-in-fact shall not be entitled to a fee for services provided as my attorney-in-fact. However, an attorney-in-fact is entitled to reimbursement of all reasonable expenses advanced by the attorney-in-fact on behalf of the principal.

**EFFECTIVE IMMEDIATELY.** This power of attorney shall be effective as of the date it is signed.

**RECORDS OF TRANSACTIONS.** The attorney-in-fact shall keep complete records of all transactions entered into by the attorney-in-fact on behalf of the principal:

- (1) for six (6) years after the date of the transaction; or
- (2) until the records are delivered to the successor attorney in fact;

whichever occurs first. If the attorney-in-fact is asked to render an accounting it shall be rendered in writing and delivered to:

- (1) the principal;
- (2) a guardian appointed for the principal;
- (3) the personal representative of the principal's estate;
- (4) an heir of the principal after the death of the principal; or
- (5) a legatee of the principal after the death of the principal;

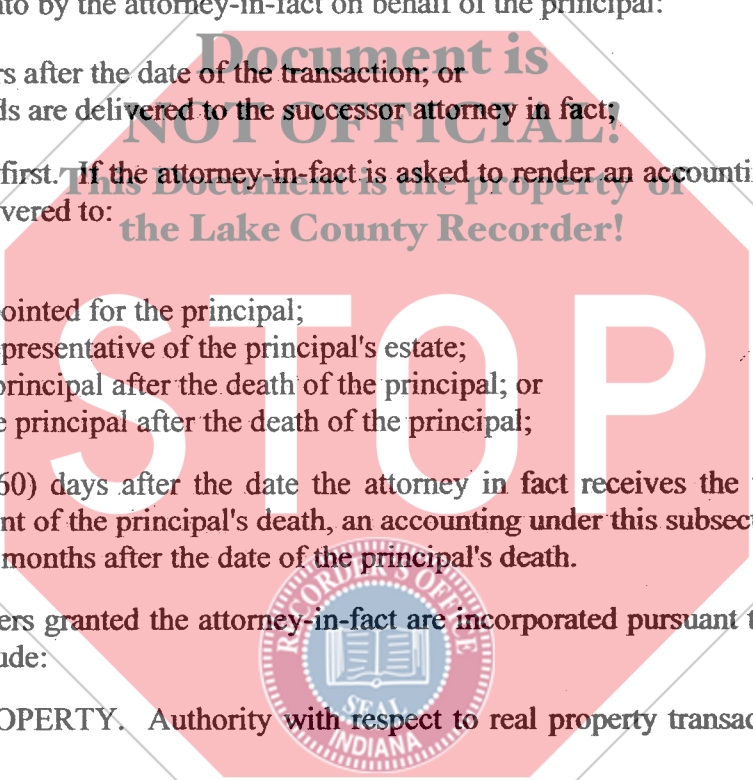
not later than sixty (60) days after the date the attorney in fact receives the written request for an accounting. In the event of the principal's death, an accounting under this subsection must be requested not later than nine (9) months after the date of the principal's death.

**POWERS.** The powers granted the attorney-in-fact are incorporated pursuant to Ind. Code § 30-5-5-1, some of which include:

1. **REAL PROPERTY.** Authority with respect to real property transactions pursuant to Ind. Code § 30-5-5-2.
2. **TANGIBLE PERSONAL PROPERTY.** Authority with respect to tangible personal property pursuant to Ind. Code § 30-5-5-3.

2014  
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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2014 FEB - 4 AM 10:30  
MICHAEL B. BROWN  
RECORDER



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**FILED**

COMMUNITY TITLE COMPANY  
FILE NO 135352

FEB 04 2014

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LAKE COUNTY AUDITOR

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3. BANKING. Authority with respect to banking transactions pursuant to Ind. Code § 30-5-5-5.

4. INSURANCE. Authority with respect to insurance transactions pursuant to Ind. Code § 30-5-5-7 and including authority to purchase a non-assignable, non-cancelable, single premium irrevocable straight life commercial annuity on my life to provide monthly installments with the balance to my beneficiaries.

5. FIDUCIARY. Authority with respect to fiduciary transactions pursuant to Ind. Code § 30-5-5-10.

6. RECORDS, REPORTS AND STATEMENTS. Authority with respect to records, reports and statements pursuant to Ind. Code § 30-5-5-14, including the power to execute on my behalf any specific power of attorney required by any taxing authority to allow my attorney-in-fact to act on my behalf before that taxing authority on any return or issue.

**DURATION & TERMINATION ON DEATH.** Without regard to my mental or physical condition, this power of attorney shall be durable and continue in effect until February 28, 2014 or until my death whichever occurs first.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 24 day of January, 2014.

STATE OF INDIANA )  
 )  
 COUNTY OF PORTER )

*Carl E. Grose*  
**CARLE E. GROSE**  
 Social Security Number: XXX-XX-2782

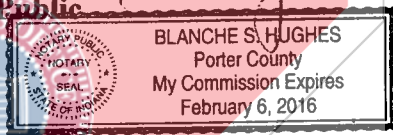
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 ) SS: Lake County Recorder!  
 )

Before me, a notary public in and for said County and State, personally appeared CARL E. GROSE who acknowledged the execution of the foregoing Power of Attorney.

WITNESS my hand and notarial seal this 24 day of January, 2014.

*Blanche S. Hughes*  
 Notary Public

My County of record: \_\_\_\_\_  
 My County of residence: \_\_\_\_\_



**THIS DOCUMENT PREPARED BY AND AFTER RECORDING RETURN TO:**  
 Attorney Thomas C. Higgins (#15663-45)  
 Koransky, Bouwer & Poracky, P.C.  
 425 Joliet Street, Suite 425, Dyer, IN 46311  
 (219) 865-6700

*C E G*  
 initials

## Power of Attorney of Mary K. Grose

BY THIS POWER OF ATTORNEY, I, **MARY K. GROSE**, name an attorney-in-fact with power to act on my behalf pursuant to Ind. Code § 30-5, as it exists now and is amended in the future.

As my attorney-in-fact, I name **ATTORNEY THOMAS C. HIGGINS** whose address and telephone number are: 4601 Rutland Road, Valparaiso, IN (219) 465-1058.

**LIABILITY LIMITED.** My attorney-in-fact shall only be liable for actions undertaken in bad faith except if my attorney-in-fact is involved in self-dealing. The attorney in fact shall use due care to act for the benefit of the principal under the terms of the power of attorney.

**NO FEE.** My attorney-in-fact shall not be entitled to a fee for services provided as my attorney-in-fact. However, an attorney-in-fact is entitled to reimbursement of all reasonable expenses advanced by the attorney-in-fact on behalf of the principal.

**EFFECTIVE IMMEDIATELY.** This power of attorney shall be effective as of the date it is signed.

**RECORDS OF TRANSACTIONS.** The attorney-in-fact shall keep complete records of all transactions entered into by the attorney-in-fact on behalf of the principal:

- (1) for six (6) years after the date of the transaction; or
- (2) until the records are delivered to the successor attorney in fact;

whichever occurs first. If the attorney-in-fact is asked to render an accounting it shall be rendered in writing and delivered to:

- (1) the principal;
- (2) a guardian appointed for the principal;
- (3) the personal representative of the principal's estate;
- (4) an heir of the principal after the death of the principal; or
- (5) a legatee of the principal after the death of the principal;

not later than sixty (60) days after the date the attorney in fact receives the written request for an accounting. In the event of the principal's death, an accounting under this subsection must be requested not later than nine (9) months after the date of the principal's death.

**POWERS.** The powers granted the attorney-in-fact are incorporated pursuant to Ind. Code § 30-5-5-1, some of which include:

1. **REAL PROPERTY.** Authority with respect to real property transactions pursuant to Ind. Code § 30-5-5-2.
2. **TANGIBLE PERSONAL PROPERTY.** Authority with respect to tangible personal property pursuant to Ind. Code § 30-5-5-3.

- 3. **BANKING.** Authority with respect to banking transactions pursuant to Ind. Code § 30-5-5-5.
- 4. **INSURANCE.** Authority with respect to insurance transactions pursuant to Ind. Code § 30-5-5-7 and including authority to purchase a non-assignable, non-cancelable, single premium irrevocable straight life commercial annuity on my life to provide monthly installments with the balance to my beneficiaries.
- 5. **FIDUCIARY.** Authority with respect to fiduciary transactions pursuant to Ind. Code § 30-5-5-10.
- 6. **RECORDS, REPORTS AND STATEMENTS.** Authority with respect to records, reports and statements pursuant to Ind. Code § 30-5-5-14, including the power to execute on my behalf any specific power of attorney required by any taxing authority to allow my attorney-in-fact to act on my behalf before that taxing authority on any return or issue.

**DURATION & TERMINATION ON DEATH.** Without regard to my mental or physical condition, this power of attorney shall be durable and continue in effect until February 28, 2014 or until my death whichever occurs first.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 24 day of January, 2014.

*Mary K. Grose*  
 \_\_\_\_\_  
**MARY K. GROSE**  
 Social Security Number: XXX-XX-1562A

STATE OF INDIANA )  
 )  
 COUNTY OF PORTER )

**NOT ORIGINAL!**  
 This Document is the property of  
 ) SS: e Lake County Recorder!  
 )

Before me, a notary public in and for said County and State, personally appeared MARY K. GROSE who acknowledged the execution of the foregoing Power of Attorney.

WITNESS my hand and notarial seal this 24 day of January, 2014.

*Blanche S. Hughes*  
 \_\_\_\_\_  
 Notary Public

My County of record: \_\_\_\_\_

My County of residence: \_\_\_\_\_

BLANCHE S. HUGHES  
 Porter County  
 My Commission Expires  
 February 6, 2016

**THIS DOCUMENT PREPARED BY AND AFTER RECORDING RETURN TO:**  
 Attorney Thomas C. Higgins (#15663-45)  
 Koransky, Bouwer & Poracky, P.C.  
 425 Joliet Street, Suite 425, Dyer, IN 46311  
 (219) 865-6700

*h k G*  
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 initials