Fax to 856-917-1304

2014 008072

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2014 FEB 11 AM 10: 29

MICHAEL B. BROWN RECORDER

LIMITED POWER OF ATTORNEY

(REAL ES	SIAIE)	,
I, ADRIENNE CATALDO, St. Charles County, State of and mentally competent, do hereby designate BRAD CATALDO, MSSOUTI , as my true and lawful attorney-in-	of Sticharke	, being at least 18 years of age County, State of

## **POWERS AND PURPOSES**

The above named attorney-in-fact shall have authority with respect to real property transactions pursuant to Ind. Code S 30-5-5-2, pertaining to the transaction of the real estate described below, situated in Lake County, State of Indiana:

LOT 9, CASA BELLA ADDITION, UNIT 3 TO THE TOWN OF SCHERERVILLE AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 49, PAGE 7, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

the address of such real estate is commonly known as 2501 Capri Drive, Schererville, Indiana 46375, (the "Real Estate") and shall be construed so as to effectuate this purpose. This authority shall include, by way if illustration and not limitation, the the Lake County Recorder!

To make, draw, and endorse promissory notes, checks or bills, mortgages, or exchange pertaining to the Real Estate and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;

To make and execute any and all contracts pertaining to the Real Estate;

To receive and to demand all sums of money, debts, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to comprise, settle or discharge the same;

To bargain for, contract concerning, buy, sell and convey, exchange, mortgage, encumber and in anyway and manner, deal with personal property located upon or pertaining to the Real Estate; and

To execute any and all documentation necessary to effectuate the transactions described above, including, but not limited to, closing statements, mortgages, bills of sale, promissory notes, HUD settlement statements, instruments of conveyance and supporting documentation, certifications, acknowledgments, and like instruments.

20718

~ FEB 0 7 2014

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

CHICAGO TITLE INSURANCE COMPANY

## II. EFFECTIVE DATE AND TERMINATION

Α.	This power of attorney shall be effective: (Select appropriate provision)	
	as of the date it is signed	
	as of the day of, 20	
0	upon the determination that I am disabled or incapacitated, or no longer capable of managing my affairs prudently. My disability or incapacity, for this purpose, may be established by the certificate of a qualified physician stating that I am unable to manage my affairs.	
B.	My disability or incompetence (select appropriate provision): (shall) shall not) affect or terminate this Power of Attorney.	
C.	This Power of Attorney shall terminate: (select appropriate provision)	
	upon my incapacity	
₽′	upon the 01 day of <u>January</u> , 2015	
	upon the execution and recordation with the Recorder's Office of the County where the Real Estate is located a written revocation hereof.  Document is	
	RATIFICATION AND IDENTIFICATION FFICIAL!	
I/We hereby ratify and confirm that all my attorney-in-fact shall do by virtue hereof. Further, I/We agree to indemnify and hol harmless any person who, in good faith, acts under this Power of Attorney or transacts with my attorney-in-fact in reliance upon this Power, without actual knowledge of its revocation.		
IN \ 20_	WITNESS WHEREOF, I/WE have hereunto set my/our hand(s) and seal(s) this 27th day of January	
تأ	Advienne Cataldo	
PRI	NTED: Advienne Cataldo PRINTED:	
STA	ATE OF LLD ) SS:	
COL	UNTY OFST. Charles	
	Before me a Notary Public in and for sai County and State, personally appeared Henry Cato and and who acknowledged the execution of the foregoing Power of Attorney,	
and	who, having been duly sworn, stated that any representations therein contained are true.  WITNESS my hand and NOTARIAL seal, this 27 day of	
Prin	witness my hand and NOTARIAL seaf, this day of arruption (2014)  Notary Public arruption	
•	Commission expires:  My County of Residence: HALLIE GOEBEL  HALLIE GOEBEL	
This	Notary Public - Notary Seal STATE OF MISSOURI St. Charles County  St. Commission Expires: Sept. 28, 2016	
	l affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Social social number in this document, unless required by law.	