STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

Alter REOLDING RETURN TO 2014 079240

2014 DEC 12 AH 10: 54

Peoples BANK 9204 Columbia AVE MUNSTEL IN 46321

LIMITED POWER OF ATTORNEY (REAL ESTATE)

MICHAEL B. DROWN RECORDER

, Charles A. Svitko	of	LAKE	County, Sta	ate of <u>Indiana</u>	, being a
least 18 years of age and mentally con State of <u>Indiana</u> , as my true and	npetent, do hereby de lawful attorney-in-fac	signate <u>Diane I</u> t.	. Svitko	of <u>Lake</u>	County,
l. POWERS AND PURPOSES					
The above named attorney-in-fact sha 5-2, pertaining to the transaction of the	Il have authority with re real estate described	espect to real pro I below, situated	operty transactio in <u>Lake</u>	ns pursuant to Ind. _ County, State of I	Code S 30-5 ndiana:
RESIDENTIAL APARTMENT UNIT THE COMMON AREAS AND FAC AND GARAGE UNIT 11, TOGETH COMMON AREA AND FACILITIES CONDOMINIUM HORIZONTAL PE DOCUMENT NO. 550706, RE-REG PLAT BOOK 51, PAGE 28, IN THE	ILITIES, INCLUDING ER WITH AN UNDI S, INCLUDING LIMI ROPERTY REGIME CORDED OCTOBE	G LIMITED CO VIDED .3 PER TED COMMON :, RECORDED R 18, 1979 AS	MMON AREAS CENT INTERE I AREA AND FA SEPTEMBER DOCUMENT N	S AND FACILITIES ST IN THE ACILITIES, IN JU 19, 1979 AS IO. 555436 AND	NE
	Docum	ent is			
N	OT OF	FICIA	L!		
This 1	Document is	the prope	erty of		
the address of such real estate is com Estate") and shall be construed so as limitation, the power:	to effectuate this purp	oose. This autho	nty snaii include,	by way it illustratio	ii and not
To make, draw, and endorse promisso demand, presentment, protest, notice	ory notes, checks or b of protest, and notice	ills or exchange of non-payment	pertaining to the of all such instru	Real Estate and to ments;	waive
To make and execute any and all con	tract pertaining to the	Real Estate;			
To receive and to demand all sums of Estate which are now or shall hereafter	money, debts, dues, er become due or pay	accounts, beque able to us and to	sts, interest and comprise, settle	demands pertaining or discharge the sa	g to the Real ame;
To bargain for, contract concerning, b personal property located upon or per	uy, sell and convey, e taining to the Real Es	xchange, encum tate; and	ber and in anywa	ay and manner, dea	al with
To execute any and all documentation closing statements, instruments of coinstruments.	n necessary to effectu nveyance and suppor	ate the transaction documentation	ons described ab on, certifications,	ove, including, but acknowledgments	not limited to , and like
		/	AMOUNT \$	14	1
			CASH	CHARGE	<u> </u>
			CHECK#_		-

OVERAGE___

NON-CONF_ DEPUTY____

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BT1400841

II. EFFECTIVE DATE AND TERMINATION

Α.	A. This power of attorney shall be effective: (Select appropriate provision)	
囡	as of the date it is signed	
	□ as of the day of, 20	
	upon the determination that I am disabled or incapacitated, or no longer capable of managing my affa disability or incapacity, for this purpose, may be established by the certificate of a qualified physician unable to manage my affairs.	irs prudently. My stating that I am
B.	B. My disability or incompetence (select appropriate provision): (shall) (shall not) affect or terminate thi Attorney.	s Power of
C.	C. This Power of Attorney shall terminate: (select appropriate provision)	
	upon theday of, 20 upon the execution and recordation with the Recorder's Office of the County where the Real Estate is	
<u>m</u> /	upon the execution and recordation with the Recorder's Office of the County where the Real Estate is	located a written
•	revocation hereof. NOT OFFICIAL!	
111.	III. RATIFICATION AND IDENTIFICATION the Lake County Recorder!	
ΙΛΝ	IAMO beroby ratify and confirm that all my attorney-in-fact shall do by virtue hereof. Further, I/We lagree to	indemnify and ho
har upo	harmless any person who, in good faith, acts under this Power of Attorney or transacts with my attorney-ir upon this Power, without actual knowledge of its revocation.	-lact in reliance
	Tola A	101/000 0 00
IN Y	IN WITNESS WHEREOF, I/WE have hereunto set my/our hand(s) and seal(s) this 5th day of 1	10 venuse 1
<u></u>	Charles a smiths	
	charles A. Svitko PRINTED.	
	STATE OF INDIANA COUNTY OF LOG SS:	
CO	E 1 Court I S	who
ack	Before me a Notary Public in and for said County and State, personally appeared acknowledged the execution of the foregoing Power of Attorney, and who, having been duly sworn, stated that any rep	
cor	contained are true.	
	WITNESS my hand and NOTARIAL seal, this day of day of	
Pri	Printed:, Notary Public,	
Му	My County of Residence:	
	KATHERINE E. ADAMS Lake County	
	My Commission Expires December 13, 2016	

Document is NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

STOP

"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 AAW."

PREPARED BY: