

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

2014 069114

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 OCT 31 AM 10:07

MICHAEL B. BROWN
RECORDER

DURABLE POWER OF ATTORNEY

** This document is being re-recorded **OF**
to correct the chain of title

EDWARD POLLAK

920143351

The undersigned Grantor, EDWARD POLLAK, hereby appoints RENEÈ KIMBERLING whose address is 5381 W. 1450 N., Wheatfield, Indiana, as my true and lawful attorney-in-fact to do and perform for me in my name the following:

(1) **Banking and Financial Transactions.**

a. To open accounts, in my name or on my behalf, in any bank or trust company, savings and loan company, insurance company, credit union, or any other banking or savings institution, and to deposit into such accounts, or into accounts now existing or hereafter established in my name, any money, checks, notes, drafts, acceptances or other evidences of indebtedness payable to or belonging to me, including but not being limited to checks or drafts issued by the Treasurer of the United States or any other official, bureau, department or agency of the United States Government or by the Treasurer or similar official of any State, or any other official, bureau, department or agency of any State, municipality or other government body; and to disburse, withdraw or receive from such accounts, all or any part of the balance therein;

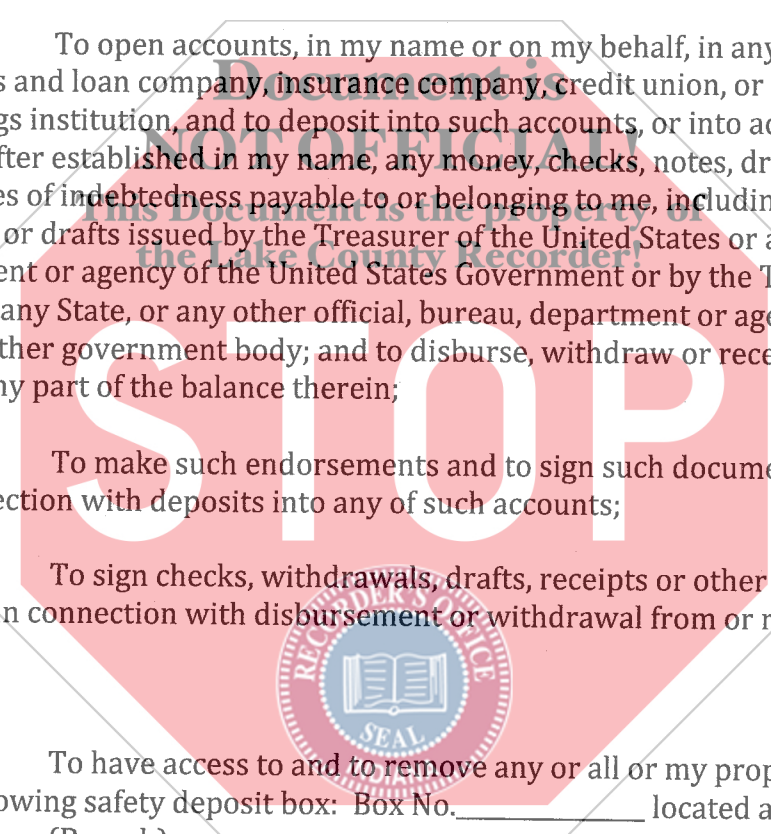
b. To make such endorsements and to sign such documents as may be required in connection with deposits into any of such accounts;

c. To sign checks, withdrawals, drafts, receipts or other documents as may be required in connection with disbursement or withdrawal from or receipt of such accounts; and

d. To have access to and to remove any or all of my property contained or held in the following safety deposit box: Box No. _____ located at
(Branch) _____
(Address) _____

(2) **Motor Vehicles.** To sell, lease maintain, insure, license, and relicense any motor vehicle which I may own or in which I may have an interest and to execute and

920143351-2



2014 OCT 31 AM 10:07
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MICHAEL B. BROWN
RECORDER

#21
REF
NON
CONF
T8
FW
AOT
SA
AA

deliver any instruments required to do so.

(3) **Tax Matters.**

- a. To prepare, execute and file on my behalf income and other tax returns and pay any amounts determined due;
- b. To prepare, execute and file on my behalf documents pertaining to real estate and personal property taxes, assessments, and applications for exemptions; and
- c. To act on my behalf in tax matters where it may be necessary to negotiate, compromise and settle tax disputes, including appealing determinations of value assessments and taxes due.

(4) **Conduct of Business.**

- a. To manage my property and to conduct my business affairs, including, but not limited to, leasing, managing and maintaining any real or personal property which I may own;
- b. To recover, obtain and hold possession of any real estate, monies, goods, chattels, debts, or any other thing in which I may have an interest; and
- c. To pay, discharge or compromise any of my debts or other obligations.

(5) **Securities Transactions.**

- a. To purchase or otherwise acquire, to sell or otherwise dispose of, securities including, but not limited to, stocks, bonds, notes, and other securities or evidences of indebtedness, all at such price and on such terms as my attorneys-in-fact may determine;
- b. To vote any such securities in my name in person or by proxy; and
- c. To receive dividends and other distributions on such securities.
- d. My attorneys-in-fact shall not be liable for losses in the sale or other disposition of my securities unless such sale or other disposition is fraudulently made or is through gross negligence.

(6) **Transfer of Interest in Real Estate.** To sell, convey, lease, grant an option to purchase, or otherwise transfer, for such consideration and upon such terms as my attorneys-in-fact shall deem advisable, including a contract for conditional sale, and also to execute and deliver any deed, sales agreement, lease, contract and any other document(s) in such manner and form as may be necessary or required for my attorney-in-fact to transfer all or any part of my interest in the following described real estate:

a. Any and all real estate in which I now hold, or may hereafter acquire, an interest.

(7) **Medical and Surgical.** To give consent for my medical and/or surgical treatment and for my hospital and/or nursing home care.

(8) **Employment of Attorney and Other Experts.** To employ an attorney and investment adviser or any other expert my attorneys-in-fact deem necessary.

(9) This Power of Attorney shall not be affected by subsequent disability or incapacity of the principal, or lapse of time.

(10) **Other Powers Specifically Designated.** _____

IN FURTHERANCE OF THESE POWERS, I give my attorney-in-fact power and authority to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of 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.

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.

All persons, firms or corporation to whom this instrument may be delivered may rely on its being in effect and unrevoked by me 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 Lake County, State of Indiana.

SIGNED, this 26th day of August, 2013; in five counterparts consisting of four (4) pages each, each of which shall be considered as an original.

Counterpart No. _____

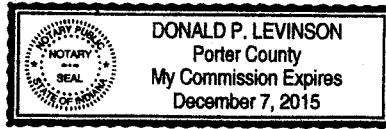

EDWARD POLLAK

Grantor's SSN: [REDACTED]

914 W. 72nd Pl.

Merrillville, IN 46410

STATE OF INDIANA)
) SS:
COUNTY OF)



BEFORE ME, the undersigned, a Notary Public in and for said County and State, this 26 day of August, 2013, personally appeared the Grantor named above, and acknowledged the execution of the above instrument to be his/her voluntary act and deed 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.

My Commission Expires:

12/7/15

A handwritten signature in black ink, appearing to read "Donald P. Levinson", written over a horizontal line.

Notary Public

County of Residence:

Porter

The Attorney-in-fact represents and warrants that within his/her knowledge this power is unrevoked and is still in full force and effect upon each and every exercise of the powers herein granted.

A handwritten signature in black ink, appearing to read "Renee Lumberg", written over a horizontal line.

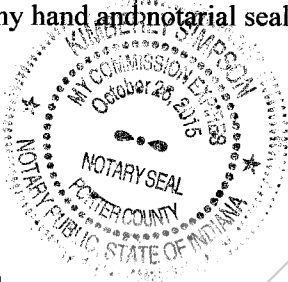
ATTORNEY-IN-FACT



STATE OF INDIANA)
) SS.
COUNTY OF Porter)

Before me, a Notary Public in and for said County and State, personally appeared Renee Kimberling as Attorney in Fact for Edward G. Pollak and JoAnn Pollak who acknowledged the execution of the foregoing deed.

Witness my hand and notarial seal on the 29th day of Oct, 2014.



Kimberly Simpson
Notary Public Kimberly Simpson
Resident of Porter County
My Commission expires: 10-28-15

Prepared by:
Austgen Kuiper Jasaitis P.C., 130 North Main Street, Crown Point, IN 46307

Grantee's Address and Tax Billing Address:
914 West 72nd Pl.
Merrillville, Ind 46410

I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law

Kimberly Simpson File No. 920143351

Return to: _____

