

CERTIFIED as a true and exact copy of this original document. By [Signature] Community Title Co.

Case No. 201501076

SPECIAL POWER OF ATTORNEY

I/We, Buddy Retzek, being at least 18 years of age and mentally competent, do hereby appoint and constitute Crystal Ann Johnson of Lake County, in the State of Indiana, Attorney in Fact with full power for my/our place and stead pursuant to Indiana Code § 30-5-5-2, to do any and every act on my/our behalf as fully as if I/we were present in person, including, but not in any way in limitation of said attorney's absolute and full power, to do each and all of the following:

- 1. To accept delivery of deeds, execute promissory notes and mortgages, execute Truth-in-Lending Statements, Closing Statements and any and all documents required by the FHA or VA if applicable and any other documents or instruments required by the lender, all in connection with the purchase of certain real estate which is more specifically described as follows:

Lot A Viking Subdivision to the City of Hobart, as per plat thereof, recorded in Plat Book 35, page 1, in the Office of the Recorder of Lake County, Indiana.

- 2. To adjust, settle, compromise and arbitrate any claims, suits, or demands in favor of or against me/us upon such terms as my/our attorney may determine.

I/We further give unto my/our said attorney full power and authority in his absolute discretion to do and perform each and every act and thing whatsoever requisite, necessary, advisable or convenient to be done to fully carry out and perform all the powers herein granted to my/our said attorney.

I/We relieve all persons dealing with my/our said attorney from seeing to the proper application of any money or other property received by my/our said attorney on my/our behalf.

I hereby ratify and confirm all that my said Attorney in Fact shall do by virtue hereof. Further, I agree to indemnify and hold harmless any person, who in good faith, acts under this Power of Attorney or transacts business with my Attorney in Fact in reliance upon this Power, without actual knowledge of its revocation.

This Power of Attorney shall not be affected by my/our subsequent disability or incompetence and shall expire upon completion of purchase/refinance of above described property.

This Power of Attorney shall be governed by, interpreted under, and subject to the Laws of the State of Indiana.

Buddy Retzek

State of Indiana
County of N/A

Before me, a Notary Public in and for the said County and State, personally appeared Buddy Retzek, known to me personally to be the individual(s) who acknowledged the execution of the foregoing Power of Attorney as his/hers/their voluntary act and deed.

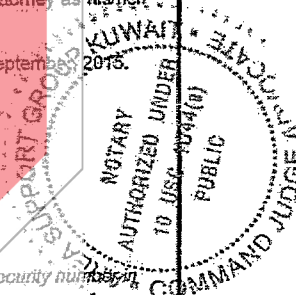
In Witness Whereof, I have hereunto affixed my signature and Notarial Seal this 20 day of September, 2015.

My commission expires 01/31/2017

Notary Public
Residing in

This instrument prepared by: Brian E. Hicks Attorney at Law
2015 5200 Indiana Ave

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 law. Brian E. Hicks



AMOUNT \$ 12-
CASH CHARGE CM
CHECK # _____
COMMUNITY TITLE COMPANY OVERAGE _____
COPY _____
NON-CONF ✓
DEPUTY AD

FILE NO. 158458

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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

