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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2015 OCT -9 PM 1:55
MICHAEL B. BROWN
RECORDER

POWER OF ATTORNEY

TAX I.D. NO.: 45-19-23-353-015.000-008

KNOW ALL MEN BY THESE PRESENTS, That the undersigned, **WILLIAM L. CARLSON**, has made, constituted and appointed, and by these presents does make, constitute and appoint **KATHLEEN A. CARLSON** true and lawful Attorney-in-Fact for me and in my name, place and stead and said Attorney-in-Fact is hereby authorized on my behalf to do and perform all and every act and thing whatsoever requisite and necessary to close out that certain real estate transaction wherein the undersigned is selling to **LAURA PURKEY**, Grantee, my entire ownership interests in and to that certain real estate (including all improvements thereof) located in **Lake County, Indiana**, more particularly described as follows:

PART OF THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 23, TOWNSHIP 33 NORTH, RANGE 9 WEST OF THE 2ND P.M. DESCRIBED AS FOLLOWS: BEGINNING AT A POINT 88.5 FEET SOUTH OF A POINT ON THE SOUTH SIDE OF WASHINGTON STREET, 93.5 FEET EAST OF THE WEST LINE OF SAID QUARTER QUARTER SECTION, THENCE SOUTH 10 FEET; THENCE EAST 55 FEET; THENCE SOUTH 50 FEET; THENCE WEST 148.5 FEET TO THE WEST LINE OF SAID QUARTER SECTION, THENCE NORTH 60 FEET; THENCE EAST 93.5 FEET TO THE PLACE OF BEGINNING.

Commonly known as: **124 N NICHOLS STREET, LOWELL, INDIANA 46356**

This is a special Power of Attorney effective solely and exclusively for the purpose of processing and handling the sale and the Closing of the sale of said real estate and to empower and authorize said Attorney-in-Fact to make, execute and deliver any deed conveying to said Grantee(s) all of the undersigned's interest in and to said real estate, together with the improvements thereon, and to execute, acknowledge and deliver in my name such documents as such Attorney-in-Fact may deem proper, and at the closing of said sale, to execute on behalf of the undersigned, any and all documents necessary to effectuate the outright sale of all my ownership interest in and to said real estate including, but not limited to, financial settlement statements, agreements prorating real estate taxes, affidavits, escrow agreements and the like, it being my purpose to authorize the said Attorney-in-Fact to handle my entire ownership interests in the aforescribed real estate as well as all matters in connection with the sale of said real estate, and said Attorney-in-Fact is authorized on my behalf to execute any and all instruments to accomplish the outright sale of said real estate and perform any and all acts necessary in and about the closing of said real estate transaction.

It is my intention in this instrument that I am creating a Durable Power of Attorney appointment under the Indiana Durable Power of Attorney Act so that this Power of Attorney document shall not be terminated or affected by my later disability or incompetence.

Any act or thing lawfully done by my Attorney-in-Fact under this instrument shall be binding on my assigns, heirs, legatees and devisees, and personal representatives. Thereby give and grant unto said Attorney-in-Fact full power to do every act necessary to be done about the premises as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said Attorney-in-Fact or any substitute shall lawfully do or cause to be done by virtue thereof.

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Commonwealth Company
158387

IN WITNESS WHEREOF, the undersigned has hereunto set his/her hand this 2 day of October, 2015.

William L. Carlson
WILLIAM L. CARLSON, Principal

STATE OF INDIANA)
COUNTY OF Lake) SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 2 day of October, 2015 personally appeared **WILLIAM L. CARLSON**, the principal named above, signed this Power of Attorney, and acknowledged the execution of it, as the voluntary act and deed of the principal, 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.

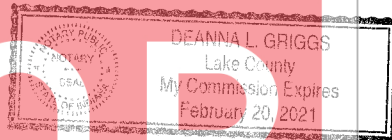
My Commission Expires: 2.2021 Signature Deanna L. Griggs

County of Residence: Lake Printed Deanna L. Griggs, Notary Public

I declare that the above power has not been revoked.

Kathleen A. Carlson
KATHLEEN A. CARLSON, Attorney-in-Fact

Document is NOT OFFICIAL!
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This instrument prepared by: **MATTHEW W. DEULLEY**, Attorney at Law, ID No. 27813-45.
No legal opinion given to Grantor. All information used in preparation of document was supplied by title company.

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.

Matthew W. Deulley
Signature of Preparer

Deanna L. Griggs
Printed Name of Preparer

