I HEREBY CERTIFY THIS TO BE A TRUE AND EXACT COPY OF THE ORIGINAL.

This document was prepared by Ingeborg Parel 9547 Rossevelt Place Crown Point, Indiana 46307

I.

Ingeborg Pavel 9547 Roosevelt Place

Crown Point, Indiana 4630

This Document is the property of the Lake County Recorder!

Ingeborg Pavel

PRINCIPAL AND ATTORNEY-IN-FACT

L Ingeborg Pavel, who reside at 9547 Roomvelt Place, Crown Point,

Indiana 46307, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with person to the subjects indicated below:

David Alan Thes lierraville, Califor

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If David Alan Their resigns or is unable or unwilling to serve or continue to serve as my attorney-in-fact, I appoint the following person to serve as my successor attorney-in-fact:

> Jeffery Brian Theis Middlenex, Vermont

#### HEFECTIVE TIME

This power of attorney is effective immediately, and will not be affected by subsequent disability or incapacity of the principal. This is a durable power of attorney.

#### FOWERS OF ATTOMOGNETATION 1S TIT.

To the extent purmitted by law, my actorney in-fact may act in my name, place, and stead in any way that I myself could with respect to the following This Document is the property of

YOUR ATTORNAPHOR SEPHENTY BRODINGED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.

# (31)

### REAL ESTATE TRANSACTIONS:

- Manage, sell, transfer, lease, mortgage, pledge, refinance, insure, maintain, improve, collect and receive rent, sale proceeds, and earnings, pay taxes, assessments, and charges, and perform any and all other acts with respect to real property and interests in real property that I own now or later sequire.
- Defend, settle, and enforce by litigation a claim to real property and interests in real property that I own now or later acquire. Buy, lease, or otherwise acquire real property or an interest in real property in lading the surfactive to enter into listing agreements and purchase and sale contracts, and to sign escrow instructions. agreements a

- Execute deeds, mortgages, releases, satisfactions, and other instruments relating to real property and interests in real property that I own now or later acquire.
- Hire and discharge accountants, bookkeepers, property managers, and other professionals providing services related to real property and interests in real property that I now own or later acquire.
- Exercise all powers with respect to real property and interests in real property that I could if present and under no disability.



### TANGIBLE PERSONAL PROPERTY TRANSACTIONS:

 Buy or otherwise acquire ownership or possession of, sell or otherwise dispose of mortgage, pledge, assign, lease, insure, maintain, improve, pay taxes on, otherwise manage tangible personal property and interests in langible personal property that I now own or later acquire, and exercise all powers with respect to personal property and interests in personal property



## This Document is the property of

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- Buy, sell, piedge, and exchange stocks, mutual funds, bonds,
   options, commodity futures, and all other types of securities in cay matrie
- Sign, accept, and deliver in my name certificates, commacts, or other documents relating to the foregoing, including agreements with brokers or agents.
- Exercise voting and other rights and enter into agreements relating thereto.
- Hire and discharge professionals providing services related to
- the management and investment of any securities in my name. Exercise all powers with respect to securities that I could if present and under coding to disability.



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### FINANCIAL INSTITUTION TRANSACTIONS:

Conduct any business with banks, savings and loan associations, credit unions, and other financial institutions, including but not limited to the authority to:

- Sign and endorse all checks and drafts in my name.
- · Deposit and withdraw funds from accounts.
- Open, maintain, and close accounts or other banking arrangements.
- Open, continue, and have access to all safe deposit boxes, and add and remove items from them.
- Borrow money, pledge property as security, and negotiate terms of debt payments.
- Apply for and receive letters of credit, credit cards, and traveler's checks, and give an indemnity or other agreement in connection with letters of credit
- Beercles all power with report to finescial metitution transactions that I could if present and under no disability.

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### NOT OFFICIAL!

- Obtain, modify, renew, convert, rescind, pay the premium tent of the minutes the name and the minutes of all capes for myself and for my family and other dependents.
  - Designate the beneficiary of the contract, but the attorney-infact may be named a beneficiary of the contract, or an extension, rerewal, or substitute for it, only if the attorney-in-fact was named as a beneficiary under a contract procured by the principal before signing this power of attorney.
- Surrender and receive the cash value, borrow against or pledge enginesurance or annuity policy.
- Exercise all powers with respect to insurance and annuity transactions that I could it present and under no disability.



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### **ESTATE AND TRUST TRANSACTIONS:**

- To act for me in all matters that affect a trust, probate estate, guardianship, conservatorship, escrow, custodianship, or other fund from which I am now, claim to be, or later become entitled, as a beneficiary, to a share or payment, including but not limited to the authority to sign a qualified disclaimer pursuant to Internal Revenue Code Section 2518 and applicable state law, and petitions, objections, waivers, consents, receipts, settlements, and other agreements relating to the above-referenced matters or proceedings.
- Transfer any of my property to a living trust that I created as a grantor before this power of attorney was signed.
- Exercise all powers with respect to estate and trust transactions that I sould if present and under no disability.

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To a Not me in all legal matters, whether claims in my favor or against me, including but not limited to the authority to retain and discharge addition and proceedings, channeling actions in my name signals I documents submit claims to arbitration or mediation, settle claims, and pay judgments and settlements; and exercise all powers with respect to legal actions that I could if present and under no disability.

# JP,

#### PERSONAL AND FAMILY CARE:

To do all acts necessary to maintain my customary standard of living, and that of any individuals legally entitled to be supported by me, including but not limited to the authority to provide and pay for medical care, shelter, clothing, food, usual vacations, education, transportation, living ones for social organizations and to exercise all powers with tempero to personal and family care that could if present and vider no disability. My attorney in fact is specifically authorized to him and compensate household nursing, and other employees necessary for my well-being and that of any hadividuals legally entitled to be supported by me, and to enter into contracts and comfoil my resources with respect to the provision of

my residential case in a convalescent hospital, skilled mussing home, or alternative residential facility.

#### (ID) GOVERNMENT ASSISTANCE:

Claim and collect benefits from the Social Security Administration, including, but not limited to, retirement benefits, supplemental social security, and social security disability benefits and, Medicare, Medicaid, or state, local, and other government programs or civil or military service, and to exercise all powers with respect to government assistance that I could if present and under no disability.

### RETIREMENT PLAN TRANSAC

ragetirement, deferred To act for me in all purities that a ding but not limited to the cozniper one designate beneficiaries, make at powers, make "rollovers" of the probeles and flam a eneficiary of a jainer Lake Gaugany Recondenders with respect to retirement plans that I could if present and under no disability.

#### GIFTS:

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Make gifts from my assets, including debt forgiveness. However my attorney-in-fact is prohibited from giving any of my assets, interests or rights, directly or indirectly, to himself or heiself, or to his or her creditors.

PET AND ANIMAL CARE.

To do all acts necessary to main the the customary standard of living of all pets and animals currently supported by me, including. but not limited to, providing and paying for shelter, food, and eterinary care.

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My attorney-in-fact is empowered to take all further action, including the payment of expenditures and the preparation and execution of all documents, as my attorney-in-fact deems necessary or appropriate to fully effectuate the purposes of the foregoing matters.

### IV. GENERAL PROVISIONS

- 1) Reliance By Third Parties. I hereby agree that any third party receiving a duly executed copy of this document may rely on and act under it.

  Revocation or termination of this power of attorney will be ineffective as to a third party unless and until that third party receives actual notice or knowledge of the revocation or termination. For myself and for my heirs, executors, legal representatives, devisees, and assigns. I hereby agree to indemnify and hold harmless any third party from any and all claims because of good faith relinace on this instrument.
- 2) Severability licens provision in this provide attention is found to be invalid or unenforceable, this invalidity or unenforceability will not affect the other provisions of this document, and the other provisions will be given effect without the invalid or unenforceable provision.

  the Lake County Recorder!
- 3) Revocation of Prior Powers of Attorney, I revoke all durable powers of attorney naming me as principal executed prior to this document, specifically excluding any health care powers of attorney and advance health care directives.
- 4) Revocation. I may revoke this power of attorney at any time.
- Maintenance of Records: Accounting. My attorney-in-fact must maintain records of all actions taken on my behalf, including transactions, receipts, disbursements and investment. My attorney-in-fact shall provide an accounting for all funds beguited and all acts performed as my attorney-in-fact, but only upon my receipts, the receipts of a personal representative or a fiduciary acting on my schalf, or controller. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the county clerk or with the court is specifically waitest.

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- 6) Compensation and Reimbursement. My attorney-in-fact is entitled to reasonable compensation for services provided on my behalf pursuant to this power of attorney. My afterney-in-fact will be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this power of attorney.
- 7) No Personal Benefit. Except as specifically provided in this document, my attorney-in-fact may not personally benefit from any transaction engaged in or on my behalf, or use my assets to discharge any of his or her own legal obligations, excluding me and those I am legally obligated to support.
- 8) Liability of Attorney-in-Fact. All persons or entities that in good faith endeavor to carry out the provisions of this power of attorney will not be liable to me, my existe, or my heirs for any damages or claims arising because of their actions or mactions based on this power of attorney. My estate will indemnify and fold them far neets. A successor attorney-infact will not be liable for the acts of a prior attorney-in-fact.
- fact will not be liable for the acts of a prior attorney-in-fact.

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  9) Copies. Accopy of this durable power of attorney shall be effective as an original busil papersment is the property of

the Lake County Recorder!

IN WITNESS WHEREOF, the undersigned has executed this power of attorney on the date set forth below.

Date: 02-1/20/4 Applicate Petrill

Signature of Ingeborg Pavel



### ACKNOWLEDGMENT OF NOTARY PUBLIC

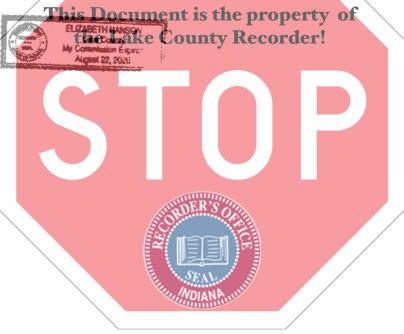
State of Indiana

County of Cale

On this \(\begin{align\*} \) day of \(\begin{align\*} \) \(\left(\text{tribel}\)\_20\frac{14}{4}\) before me, the undersigned Notary Public, personally appeared Ingeborg Pavel, personally known to me (or proved to me on the basis of satisfactory evidence) to be the individual who signed the foregoing power of attorney and acknowledged to me that he or she executed the same in his or her authorized capacity, and that by such signature, the person executed the instrument.

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Signature of Notary Publicati



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