

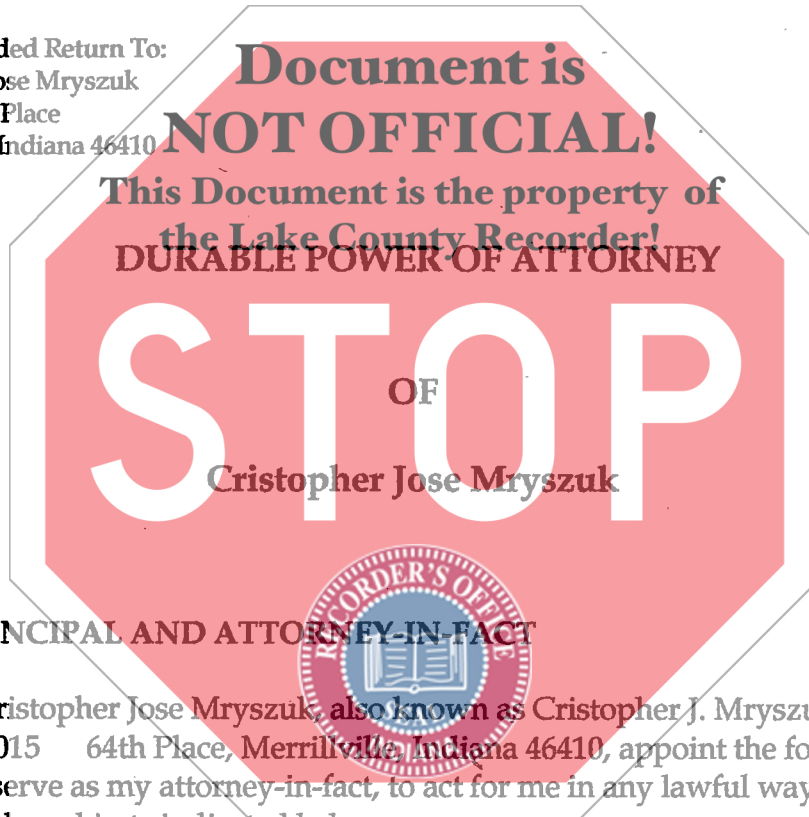
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 056001

2016 AUG 18 AM 9: 33

MICHAEL B. BROWN
RECORDER

When Recorded Return To:
Cristopher Jose Mryszuk
2015 64th Place
Merrillville, Indiana 46410



I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Cristopher Jose Mryszuk, also known as Cristopher J. Mryszuk Siri, who reside at 2015 64th Place, Merrillville, Indiana 46410, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below:

Eugene Lubomyr Mryszuk
Merrillville, Indiana

19.
CASH
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II. EFFECTIVE 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.

III. POWERS OF ATTORNEY-IN-FACT

To the extent permitted by law, my attorney-in-fact may act in my name, place, and stead in any way that I myself could with respect to the following matters:

YOUR ATTORNEY-IN-FACT SHALL BE AUTHORIZED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.

(CSM)

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 acquire.

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, including the authority to enter into listing agreements and purchase and sale contracts, and to sign escrow instructions.

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.

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 reliance on this instrument.
- 2) Severability. If any provision in this power of attorney 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.
- 3) Revocation. I may revoke this power of attorney at any time.
- 4) 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 handled and all acts performed as my attorney-in-fact, but only upon my request, the request of a personal representative or a fiduciary acting on my behalf, or court order. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the court is specifically waived.
- 5) 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 attorney-in-fact will be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this power of attorney.

- 6) 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.
- 7) 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 estate, or my heirs for any damages or claims arising because of their actions or inactions based on this power of attorney. My estate will indemnify and hold them harmless. A successor attorney-in-fact will not be liable for the acts of a prior attorney-in-fact.
- 8) Authority to Record, Register, or File. My attorney-in-fact may record, register, or file this power of attorney and other necessary and appropriate documents as required to carry out the powers granted herein.
- 9) Copies. A copy of this durable power of attorney shall be effective as an original for all purposes.

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

Date: 20160818


 Signature of Cristopher Jose Mryszuk

This instrument was prepared by Cristopher Jose Mryszuk, 2015 W 64th Place, Merrillville, Indiana 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.

Date: 20160818


 Signature of Cristopher Jose Mryszuk

**ACKNOWLEDGMENT
OF NOTARY PUBLIC**

State of Indiana

County of LAKE

On this 18th day of August, 2016, before me, the undersigned Notary Public, personally appeared Cristopher Jose Mryszuk, 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.

Witness my hand and seal.

Signature of Notary Public:

Annunziata Tina Higginbotham

