

LIMITED POWER OF ATTORNEY
(REAL ESTATE)

2

I/We, John Houseworth AKA John A Houseworth ILLINOIS
Macon County, State of ILLINOIS being at least 18 years of age and mentally
competent, do hereby designate Rosemarie Webber of Lake County,
State of Indiana, as my true and lawful attorney-in-fact.

2016 056816

I. POWERS AND PURPOSES

The above name attorney-in-fact shall have authority with respect to real property transactions pursuant to Ind. Code 30-5-5-2, pertaining to the transaction real estate described below, situated in Lake County, State of Indiana:

Hollywood Manor Lot 33, Block 5

Document is
NOT OFFICIAL!

This Document is the property of
the Lake County Recorder!

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2016 AUG 22 AM 10:28
MICHAEL B. BROWN
RECORDER

the address of such real estate is commonly known as 325 Broadmoor Ave.
(the "Real Estate") and shall be construed so as to
effectuate this purpose. This authority shall include, by way of illustration and not limitation, the
power:

To make, draw and indorse promissory notes, checks or bills or exchange pertaining to the Real Estate and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;

To make and execute any and all contract pertaining to the Real Estate;

To receive and to demand all sums of money, debts, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to compromise, settle or discharge the same;

To bargain for, contract concerning, buy, sell, encumber and in anyway and manner, deal with personal property located upon or pertaining to the Real Estate; and,

To execute any and all documentation necessary to effectuate the transactions described above, including, but not limited to, closing statements, instruments of conveyance and supporting documentation, certifications, acknowledgements, and like instrument.

FIDELITY NATIONAL
TITLE COMPANY

92016-0819

14
P
WNC.

as of the date it is signed.

as of the _____ day of _____, 2_____.

upon the determination that I am disabled or incapacitated, or no longer capable of managing my affairs prudently. My disability or incapacity, for this purpose, may be established by the certificate of a qualified physician stating that I am unable to manage my affairs.

B. My disability or incompetence (select appropriate provision): (shall) (shall not) affect or terminate this Power of Attorney.

C. This Power of Attorney shall terminate: (select appropriate provision)

upon my incapacity.

upon the _____ day of Close of sale _____, 2_____.

upon the execution and recordation with the Recorder's Office of the County where the Real Estate is located a written revocation hereof.

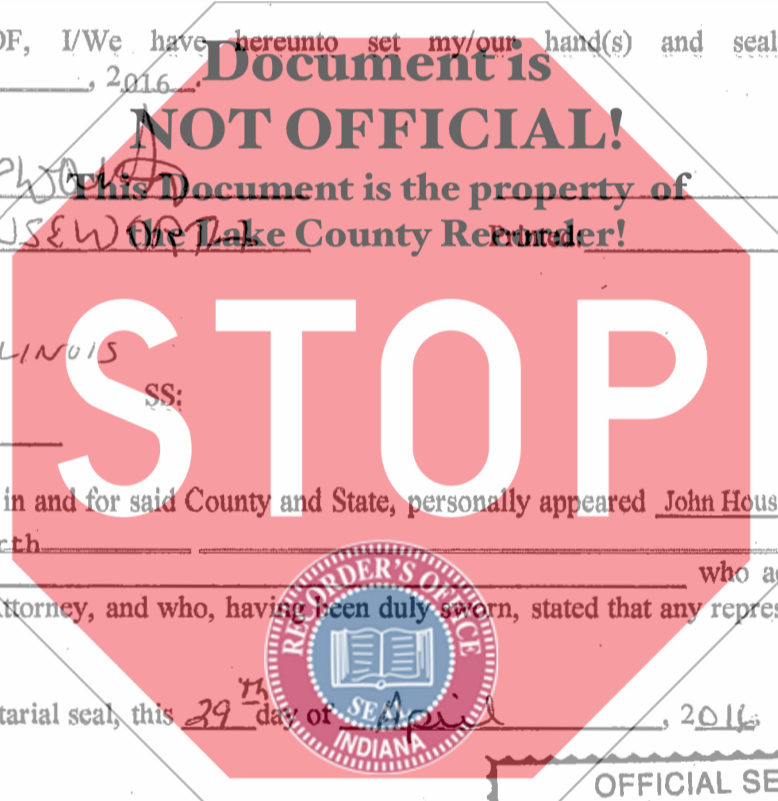
III. RATIFICATION AND INDEMNIFICATION

I/We hereby ratify and confirm that all my attorney-in-fact shall do by virtue hereof. Further, I/We 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.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand(s) and seal(s) this 29th day of April, 2016.

X John A. Houseworth

Printed: JOHN A. HOUSEWORTH



STATE OF ~~INDIANA~~ ILLINOIS

COUNTY OF Macon

Before me, a Notary Public in and for said County and State, personally appeared John Houseworth
AKA John A. Houseworth

and _____ who acknowledged the execution of the foregoing Power of Attorney, and who, having been duly sworn, stated that any representations therein contained are true.

WITNESS my hand and Notarial seal, this 29th day of April, 2016.

Diana Pittman

Notary Public

Printed: Diana Pittman



My Commission Expires: 12/28/2016

My County of Residence: DeWitt

This instrument was prepared by John A Houseworth

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. John A Houseworth