2017 020292

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 MAR 30 PM 4: 05

MICHAEL B. BROWN RECORDER

Durable Power of Attorney

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANY ONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS DURABLE POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

As used in this document, the term "Age fact / agents, and mandatary or mandatary o	ment is the propert	y of
fact / agents, and mandatary or mandata	nt snall include all agent(s), e.County Recorder aries who are appointed here	ein.
TO ALL PERSONS, be it known, that I,	7.11	, the undersigned
Principal, who resides at 534 P		, and an arrangement
City of Schereville,		,
State of Indiana, do		Pr NOUQK as my
Agent, and		must act jointly X may act
separately on my behalf.		
At the time of the execution of this Dural	ble Cock Pice Wherney	
Tennifer Movak re		acció Ave
	, County of	, State of
Indiana		, State of
At the time of the execution of this Dural	ble Power Attorney,	,
re	esides at	,
City of	, County of	, State of
If one of my Agents is unable to serve for	or any reason, 🔲 I authorize	the remaining named Agent to
act as my sole Agent OR I designate		, residing at
	, Gity of	, County of
, State of _		to serve in that person's place.
If both of my Agents are unable to serve	for any reason. Idesignate	
	_, residing at	
	, County of	, State of
	my Successor Agent.	, , , ,
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Grant of General Authority

My Agent shall care for, manage, control, and handle all of my business, financial, property and personal affairs in my name, place and stead in as full and complete a manner in which I myself could do, if I were personally present, with respect to the following matters, to the extent that I am permitted by law to act through such a representative and subject to any limitations on or additions to the specified powers inserted after the following:

(NOTICE: The Principal must write his or her initials in the corresponding blank space for each of the subdivisions (A) through (M) below for which the Principal WANTS to give the Agent authority. If the corresponding blank space for any particular subdivision is NOT initialled, NO AUTHORITY WILL BE GRANTED for those matters specified in the subdivision. ALTERNATIVELY, the letter corresponding to each power the Principal wishes to grant has been referenced in subdivision "(N)", and the Principal may initial in the blank space to the left of subdivision "(N)" in order to grant each of the powers so indicated.)



(C) Stock and bond transactions. To purchase, sell, exchange, surrender, assign, redeem, where at any meeting, or otherwise transfer any and all shares of stock, bonds, or other securities in any business, association, corporation, partnership, or other legal entity, whether private or public, now or hereafter belonging to me.

terms and conditions, and under such covenants, as my Agent shall deem proper.

(D) Commodity and option transactions. To buy, sell, exchange, assign, convey, settle and exercise commodities futures contracts and call and put options on stocks and stock indices traded on a regulated options exchange and collect and receipt for all proceeds of any such transactions; establish or continue option accounts for the Principal with any securities or futures broker; and, in general, exercise all powers with respect to commodities and options which the Principal could if present and under no disability.

(E) Banking and other financial institution transactions. To make, receive, sign, endorse, execute, acknowledge, deliver and possess checks, drafts, bills of exchange, letters of credit, notes, stock certificates, withdrawal receipts and deposit instruments relating to accounts or deposits in, or certificates of deposit of banks, savings and loans, credit unions, or other institutions or associations. To pay all sums of money, at any time or times, that may hereafter be owing by me upon any account, bill of exchange, check, draft, purchase, contract, note, or trade acceptance made, executed, endorsed, accepted, and delivered by me or for me in my name, by my Agent. To borrow from time to time such sums of money as my Agent may deem proper and execute promissory notes, security deeds or agreements, financing statements, or other security instruments in such form as the lender may request and renew said notes and security instruments from time to time in whole or in part. To have free access at any time or times to any safe deposit box or vault to which I might have access.

(F) Business operating transactions. To conduct, engage in, and otherwise transact the affairs of any and all lawful business ventures of whatever nature or kind that I may now or hereafter be involved in. To organize or continue and conduct any business which term includes, without limitation, any farming, manufacturing, service, mining, retailing or other type of business operation in any form, whether as a proprietorship, joint venture, partnership, corporation, trust or other legal entity; operate, buy, sell, expand, contract, terminate or liquidate any business; direct, control, supervise, manage or participate in the operation of any business and engage, compensate and discharge business managers, employees, agents after never accountants and consultants; and, in general, exercise all powers with respect to business interests and operations which the Principal could if present and under no disability.

(G) Insurance and annuity transactions. To exercise or perform any act, power, duty, right, or obligation, in regard to any contract of life, accident, health, disability, liability, or other type of insurance or any combination of insurance; and to procure new or additional contracts of insurance for me and to designate or change the beneficiary of same; provided, however, that my Agent cannot designate himself or herself as beneficiary of any such insurance contracts, unless the Agent is my spouse or only child.

(H) Estate, trust and other beneficiary transactions. To accept, receipt for, exercise, release, reject, renounce, assign, disclaim, demand, sue for claim and recover any legacy, bequest, devise, gift or other property interest or payment due or payable to or for the Principal; assert any interest in and exercise any power over any trust, estate or property subject to fiduciary control; establish a revocable trust solely for the benefit of the Principal that terminates at the death of the Principal and is then distributable to the legal representative of the estate of the Principal; and, in general, exercise all powers with respect to estates and trusts which the Principal could exercise if present and under no disability; provided, however, that the Agent may not make or change a will and may not revoke or amend a trust revocable or amendable by the Principal or require the trustee of any trust for the benefit of the Principal to pay income or Principal to the Agent unless specific authority to that end is given.

(I) Claims and litigation. To commence, prosecute, discontinue, or defend all actions or other legal proceedings touching my property, real or personal, or any part thereof, or touching any matter in which I or my property, real or personal, may be in any way concerned. To defend, settle, adjust, make allowances, compound, submit to arbitration, and compromise all accounts, reckonings, claims, and demands whatsoever that now are, or hereafter shall be, pending between me and any person, firm, corporation, or other legal entity, in such manner and in all respects as my Agent shall deem proper.

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(J) Personal and family maintenance. To hire accountants, attorneys at law, consultants, cierks, physicians, nurses, agents, servants, workmen, and others and to remove them, and to appoint others in their place, and to pay and allow the persons so employed such salaries, wages, or other remunerations, as my Agent shall deem proper.
(K) Benefits from Social Security, Medicare, Medicaid, or other governmental programs, or military service. To prepare, sign and file any claim or application for Social Security, unemployment or military service benefits; sue for, settle or abandon any claims to any benefit or assistance under any federal, state, local or foreign statute or regulation; control, deposit to any account, collect, receipt for, and take title to and hold all benefits under any Social Security, unemployment, military service or other state, federal, local or foreign statute or regulation; and, in general, exercise all powers with respect to Social Security, unemployment, military service, and governmental benefits, including but not limited to Medicare and Medicaid, which the Principal could exercise if present and under no disability.
(L) Retirement plan transactions. To contribute to Withdraw from and deposit funds in any type of retirement plan (which term includes, without limitation, any tax qualified or nonqualified pension, profit sharing, stockbonus, employed savings and other retirement plan, individual retirement account, deferred compensation plan and any other type of employed benefit plan); select and change payment options for the Principal under any retirement plan; make rollover contributions from any retirement plan to other retirement plans or individual retirement accounts; exercise all investment powers available under any type of self-directed retirement plan; and, in general, exercise all powers with respect to retirement plans and retirement plan account balances which the Principal could if present and under no disability. (M) Tax matters. To prepare, to make elections, to execute and to file all tax, Social Security, unemployment insurance, and informational returns required by the laws of the United States, or of any state or subdivision thereof, or of any foreign government; to prepare, to execute, and to file all other papers and instruments which the Agent shall think to be desirable or necessary for safeguarding of me against excess or illegal taxation of activity conalities imposed for claimed violation of any law or other governmental regulation; and to each to content on the proper of the MATTERS LISTED ABOVE. YOUNEED NOT INITIAL ANY OTHER LINES IF YOU INITIAL LINE (N). Grant of Specific Authority (Optional) My Agent MAY NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:
(CAUTION: Granting any of the following will give your Agent the authority to take actions that could significantly reduce your property or change how your property is distributed at your death. INITIAL ONLY the specific authority you WANT to give your Agent.)
 () Create, amend, revoke or terminate an inter vivos trust. () Make a gift. () Create or change rights of survivorship. () Create or change a beneficiary designation. () Authorize another person to exercise the authority granted under this Durable Power of Attorney.

() Waive the Principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan. () Exercise fiduciary powers that the Principal has authority to delegate. () Disclaim or refuse an interest in property, including a power of appointment.
Limitation on Agent's Authority An Agent that is not my ancestor, spouse or descendant MAY NOT use my property to benefit the Agent or a person to whom the Agent owes an obligation of support unless I have included that authority in the Special Instructions.
Special Instructions (Optional) Additional powers, if any, that are not inconsistent with the other provisions of this Durable Power of Attorney:
Document is NOT OFFICIAL! The powers granted hereinabove shall not include the following powers or shall be modified or limited in the following particulars his Document is the property of
Additional powers, if any, granted to the Agent with respect to any power listed above and not eliminated/struck out by the Principal:
Special Instructions for Gifts Special instructions applicable to gifts (initial in front of the following sentence to have it apply): () I grant my Agent the power to apply my property to make gifts to individuals, charities, or to the Agent, up to the amount of \$500 per year, per/individual or entity, without signature of the Principal, as the Agent determines to be in the Principal's best interest.
Authorization for an Agent to make gifts or transfers of \$500 or more requires the Principal to execute a Major Gifts Rider at the same time as the Durable Power of Attorney document.
() I grant my Agent the power to make major gifts and transfers of my property set forth under the Major Gifts Rider.
Nomination of Guardian or Conservator (Optional) In the event that a court decides that it is necessary to appoint a Guardian of my person or Conservator of my estate, I hereby nominate

Effective Date/Durable Provision This Durable Power of Attorney shall be effective immediately, shall not be affected by any lapse of time, and shall not be affected by the subsequent incapacity of the Principal except as provided by statute in the State of, and all acts done by the Agent under the power granted herein during any period of the Principal's disability or incapacity shall have the same effect and inure to the benefit of and bind the Principal and Principal's successors in interest as if the Principal were competent and not disabled.
My Agent hereby accepts this appointment subject to its terms and agrees to act and perform in the said fiduciary capacity and observe the standards of care applicable to trustees as described by relevant statute consistent with my best interests as his, her, or their best discretion deem advisable, and I affirm and ratify all acts so undertaken.
If the Agent is a corporate Agent, the Agent shall not use my assets for its benefit, nor the benefit of its officers or directors.
If this Durable Power of Attorney is revoked or terminated, such revocation or termination for any reason in accordance with law shall be ineffective as to any Agent unless and until actual notice or knowledge of such revocation or termination shall have been received by the Agent. This Document is the property of
My subsequent death shall not revoke or terminate the agency granted herein as to my Agent who, without actual knowledge of my death, acts in good faith under this Durable Power of Attorney. Any action so taken, unless otherwise invalid or unenforceable, shall bind my successors in interest.
Notice to Third Parties To induce any third-party to act hereunder, I hereby agree that any third-party receiving a duly executed copy or facsimile of this instrument may act hereunder, and that revocation or termination shall have been received by such third-party, and I for myself and for my heirs, executors, legal representatives and assigns, hereby agree to indemnify and hold harmless any such third-party from and against any and all claims which may arise against such third-party by reason of such third-party having relied on the provisions of this instrument. THIS DURABLE POWER OF ATTORNEY MAY SE REVOKED OF AMENDED IN WRITING BY ME AT ANY TIME.
Jill Doube (date)

First Witness

Second Witness

(date)

(date)

AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY AND AGENT'S AUTHORITY

STATE OF Indiana
COUNTY OF Lake
granted me authority as Agent or Successor Agent in a power of attorney dated Feb 1 2017.
I further certify that to my knowledge:
(1) the Principal is alive and has not revoked the Power of Attorney or my authority to act under the Power of Attorney and the Power of Attorney and my authority to act under the Power of Attorney have not terminated;
(2) if the Power of Attorney was drafted to become effective upon the happening of an event or con-
(3) if I was named as a Successor Agent, the prior Agent is no longer able or willing to serve. OFFICIAL Agent Signature and Date The Lake County Recorder! Printed Name of Agent, Address and Phone Number The Lake County Recorder! The Lake County Recorder!
Phone: 219-310-0775
A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the tothfulness, accuracy, or validity of that document.
On
I certify under PENALTY OF PERJURY under the laws of the State of
WITNESS my hand and official seal. Signature of Notary Affiant Known Produced ID Type of ID TERRIL JOHNSON Seal Notary Public - State of Indiana Porter County My Commission Expires Jan 19, 2025 (Seal)

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