

GENERAL POWER OF ATTORNEY

BY THIS POWER OF ATTORNEY, I RUTH MARIA DAMJANOVICH name an attorney-in-fact with power to act on my behalf pursuant to Indiana Code Title 30 Article 5 as it exists now and is amended in the future. I hereby revoke any powers of attorney executed by me prior to the date of this power of attorney.

1. As my attorney-in-fact, I name my daughter, MILLIE DAMJANOVICH, whose address and telephone number as of this date are 2715 W. 41st Avenue, Gary, Indiana (219) 980-1415.

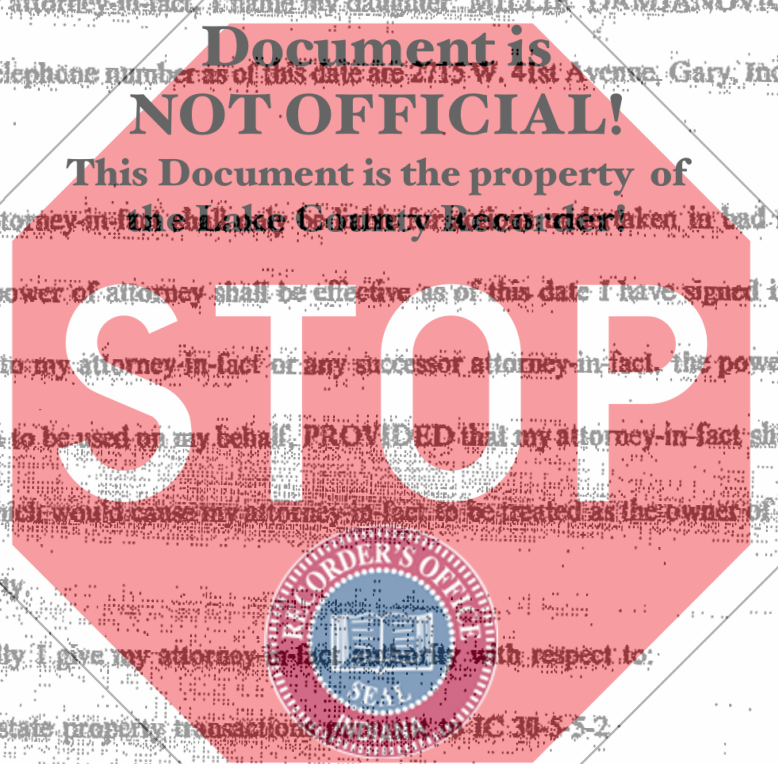
2. My attorney-in-fact shall have the authority to take in bad faith

3. This power of attorney shall be effective as of this date I have signed it.

4. I give to my attorney-in-fact or any successor attorney-in-fact, the powers specified in this section to be used on my behalf, PROVIDED that my attorney-in-fact shall not have any power which would cause my attorney-in-fact to be treated as the owner of any interest in my property.

Specifically I give my attorney-in-fact authority with respect to:

- a. real estate property transactions pursuant to IC 30-5-5-2
- b. tangible personal property pursuant to IC 30-5-5-3
- c. bond, share and commodity transactions pursuant to IC 30-5-5-4
- d. banking transactions pursuant to IC 30-5-5-5
- e. business operating transactions pursuant to IC 30-5-5-6
- f. insurance transactions pursuant to IC 30-5-5-7 as amended
- g. beneficiary transactions pursuant to IC 30-5-5-8
- h. gift transactions pursuant to IC 30-5-5-9
- i. fiduciary transactions pursuant to IC 30-5-5-10



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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

MICHAEL B. BROWN  
RECORDER

23211  
NORTHWEST INDIANA TITLE  
162 WASHINGTON STREET  
LOWELL, IN 46356  
219-996-0100

AMOUNT \$ 25.00  
 CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
 CHECK # 7020  
 OVERAGE \_\_\_\_\_  
 COPY \_\_\_\_\_  
 NON-COM \_\_\_\_\_  
 CLERK \_\_\_\_\_

m. records, reports and statements pursuant to IC 30-5-5-14 including the power to execute on my behalf any specific power of attorney required by any taxing authority to allow my attorney-in-fact to act on my behalf before that taxing authority on any return or issue

n. estate transactions pursuant to IC 30-5-5-15

o. delegation of authority pursuant to IC 30-5-5-18

p. all other matters pursuant to IC 30-5-5-19

5. I have been given a copy of the aforementioned Indiana Code sections and I have read and understood them.

6. If protective proceedings are instituted on my behalf or a guardian is requested to act on my behalf, I name ~~myself~~ as ~~guardian~~ to act on my behalf or as my guardian.

7. Without regard to my mental or physical condition, this power of attorney shall continue in effect until revoked or until my death, whichever occurs first.

Date: March 21, 1995



*Maria Damianovich*  
MARIA DAMIANOVICH

**REDACTED**

STATE OF INDIANA

COUNTY OF LAKE

The undersigned, a notary public in and for the above county and state, residing in Lake County, certifies and witnesses that the above signed, personally known to me to be the same person whose name is subscribed to this instrument, appeared before me in person and acknowledged the signature and delivered the instrument as a free and voluntary act, for the uses and purposes named in the instrument.

DATE: March 21, 1995

*Donald Stepanovich*

DONALD STEPANOVICH, Notary Public  
Resident of Lake County

My Commission Expires:  
May 6, 1996

*Prepared by Donald Stepanovich, atty*