

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

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MICHAEL B. BROWN  
RECORDER

**REVOCATION AND NOTICE OF REVOCATION OF LIVING WILL DECLARATION,  
HEALTH CARE DURABLE POWER OF ATTORNEY, APPOINTMENT OF HEALTH CARE  
REPRESENTATIVE and DURABLE POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS that I, SHARON L. GLUTH, hereby revoke unconditionally and for all purposes that certain Living Will Declaration, Health Care Durable Power of Attorney, Appointment of Health Care Representative, and Durable Power of Attorney, given by me to my dear and trusted friend, BRAD MATTHEWS, as my Health Care Representative and/or Attorney-in-Fact, and to my dear and trusted friend, LAURA BETTEN, as successor Health Care Representative and/or Attorney-in-Fact, dated and acknowledged on January 17, 2011, but unrecorded to the best of my knowledge.

This instrument shall serve as notice to all interested persons and to the world that the aforesaid documents are now revoked, void, of no further force and effect, and that I will no longer be bound by any thing, act or deed done for me, on my behalf or in my name, place or stead under the authority of said documents.

WITNESS my hand this 22nd day of November, 2017.



SHARON L. GLUTH

*Sharon L. Gluth*

STATE OF INDIANA )  
                                  ) SS:  
COUNTY OF LAKE )

Before me, the undersigned, a Notary Public in and for Lake County, State of Indiana, personally appeared SHARON L. GLUTH and acknowledged the execution of the above and foregoing instrument this 22nd day of November, 2017.

My Commission Expires:  
09/13/2017



*Jessica A. Pavlakis*  
Jessica A. Pavlakis - Notary Public  
Resident of Lake County

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.  
*William J. Cunningham, Attorney at Law*

**THIS INSTRUMENT PREPARED BY:**  
William J. Cunningham, Esq. (#3471-45)  
HILBRICH CUNNINGHAM DOBOSZ VINOVICH & SANDOVAL, LLP  
2637 - 45<sup>th</sup> Street  
Highland, Indiana 46322  
(219) 924-2427



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*CB*