

**DURABLE POWER OF ATTORNEY**  
**FOR PROPERTY AND BUSINESS TRANSACTIONS**

I, **Beverly E. Fitzner**, of 1729 Ridge Rd., Munster, Indiana 46321, hereby create a durable Power of Attorney (Power) for Property and Business Transactions.

I appoint my son, **Jonathan A. Fitzner**, presently of 5930 Byron St., Chicago, Illinois 60634, as my attorney in fact (Attorney-in-Fact) with the power to act on my behalf according to *Indiana Code I.C. 30-5-5*, as it now exists or may exist in the future.

A successor Attorney-in-Fact shall be replaced as provided herein, and the successor Attorney-in-Fact shall replace and succeed the prior Attorney-in-Fact in the order listed below and carry out the terms of this Power.

Successor Attorneys-in-Fact:

My grandson **David Benjamin Vannau (Ben)**, presently of 3123 Farmer Dr., Highland, IN 46322

This Power shall become effective immediately. This Power shall not be affected by my subsequent disability or incapacity, or lapse of time.



I give my Attorney-in-Fact the powers contained in this Power. These powers are granted upon the condition that they will be used for my benefit and on my behalf and will be exercised only in a fiduciary capacity.

1. **Trust Agreement.** Authority with respect to delivering and conveying my assets to the then Trustee of any Trust that I may create before my death;
2. **Real Property.** Authority with respect to real property transactions pursuant to I.C. 30-5-5-2;
3. **Tangible Personal Property.** Authority with respect to tangible personal property transactions pursuant to I.C. 30-5-5-3;
4. **Bond, Share, and Commodity.** Authority with respect to bond, share, or commodity transactions pursuant to I.C. 50-5-5-4. This authority includes the power to purchase United States Government obligations which are redeemable at par in payment of estate taxes imposed by the United States Government;
5. **Banking.** Authority with respect to banking transactions pursuant to I.C. 30-5-5-5, including, but not limited to, the authority to access any and all safety deposit boxes in my name, and to open, inspect, inventory, place in or remove items from and close said safety deposit boxes;
6. **Business.** Authority with respect to business transactions pursuant to I.C. 30-5-5-6;

2017 086991  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
MICHAEL BERROW  
RECORDER  
2017 DEC 26 AM 8:17

\$25.00  
E 2214J  
CAB

7. **Insurance.** Authority with respect to insurance transactions pursuant to I.C. 30-5-5-7. This authority shall include full power to apply for and otherwise deal with Medicare and Medicaid benefits;
8. **Beneficiary.** Authority with respect to beneficiary transactions pursuant to I.C. 30-5-5-8;
9. **Gifts.** Authority with respect to gift transactions pursuant to I.C. 30-5-5-9;
10. **Fiduciary.** Authority with respect to fiduciary transactions pursuant to I.C. 30-5-5-10;
11. **Claims and Litigation.** Authority with respect to claims and litigation pursuant to I.C. 30-5-5-11;
12. **Family Maintenance.** Authority with respect to family maintenance pursuant to I.C. 30-5-5-12;
13. **Military Service.** Authority with respect to benefits from military service pursuant to I.C. 30-5-5-13;
14. **Records, Reports, and Statements.** Authority with respect to records, reports, and statements pursuant to I.C. 30-5-5-14, including, but not limited to, 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;
15. **Estate Transactions.** Authority with respect to estate transactions pursuant to I.C. 30-5-5-15;
16. **Delegating Authority.** Authority with respect to delegating authority in writing to one (1) or more persons as to any or all powers given to my Attorney-in-Fact by this Power, pursuant to I.C. 30-5-5-18;
17. **Employee Benefits Plans.** The authority and power to treat all interests which I may have in employee benefit trusts as described in I.C. 30-4-3-2(c), nonqualified deferred compensation arrangements, Individual Retirement Accounts, Annuities, and qualified Pension and Profit Sharing Plans as beneficiary transactions coming within the scope of I.C. 30-5-5-8;
18. **All Other Matters.** Authority with respect to all other possible matters and affairs affecting property owned by me pursuant to I.C. 30-5-5-19.



**GIFTS**

My Attorney-in-Fact shall have general authority with respect to financial and estate planning, considering factors related both to my disability and my death, including, but not limited to:

- (a) To give at any time or times any or all of my assets, cash, property, or interests in property, including any right to receive income from any source and including a change of ownership or beneficiary on any policy of life insurance, to those persons and in the same proportions as set forth in my estate planning instruments, and without regard to any restrictions on aggregate yearly value of a gift to an individual

as set forth in I.C. 30-5-5-9. If my Attorney-in-Fact is a beneficiary of my estate, then such Attorney-in-Fact is specifically authorized to receive a proportionate share of any gift as provided hereafter;

- (b) To create trust or other legal entities or agreements necessary to effect my estate plan;
- (c) To make transfers pursuant to I.C. 30-2-8-5, commonly known as the Indiana Uniform Transfer to Minors Act, or under any similar law of another jurisdiction;
- (d) To disclaim any property or interest in property or powers;
- (e) To employ other financial estate planning devices;
- (f) To take any and all actions necessary to receive government benefits for my health care, welfare, maintenance, and support.

The estate and financial planning powers herein conferred are for the purpose of reducing tax liability and effecting transfers to family and charities.

In carrying out the powers granted in this paragraph, my Attorney-in-Fact shall be guided by the standard that the estate planning powers are designed, in part, for the preservation of my assets and shall exercise such powers in a way as to provide for my best interests and of the beneficiaries of the plan, without any prohibition against self-dealing.

In the exercise of any powers described in this Power, my Attorney-in-Fact shall have full power and authority to do and perform every act and thing necessary, proper, or convenient to be done as fully to all intents and purposes as I might or could do for myself.

Notwithstanding the foregoing, in no event shall my Attorney-in-Fact have any of the following powers:

- (a) To benefit him/her self or any other person in any way that could result in any part of my property being included in my Attorney-in-Fact's gross estate for federal estate tax purposes, or cause any of my property to be deemed to be the subject of a taxable gift made personally by my Attorney-in-Fact;
- (b) To make any payment or application which discharges any legal obligation of my Attorney-in-Fact;
- (c) To possess the power to exercise any incident of ownership with respect to any policy I own insuring the life of my Attorney-in-Fact;

- (d) To have any power which causes the holder of the power to be treated as the owner or any interest in my property and which causes that property to be taxed as owned by the Attorney-in-Fact;
- (e) To establish a new residence or legal domicile for me, from time to time and at any time, within or without this state, and within or without the United States, for such purposes as my Attorney-in-Fact shall deem appropriate, including, but not limited to, any purpose for which this instrument was created.

I ratify and confirm all that my Attorney-in-Fact does, or causes to be done, under the authority granted by this Power. All documents signed, endorsed, drawn, accepted, made, executed, or delivered by my Attorney-in-Fact shall bind me, my estate, my heirs, successors and assigns.

RELIANCE BY THIRD PARTIES

To induce third parties to act in accordance with the powers granted to my Attorney-in-Fact in this Power, I represent and warrant that:

- (a) If this document is revoked or amended for any reason, I, my estate, my heirs, successors, and assigns will hold any third party harmless from any loss suffered, or liability incurred by the third party in acting in accordance with this document before the third party's receipt of written notice of termination or amendment;
- (b) The powers conferred on my Attorney-in-Fact may be exercised alone; my Attorney-in-Fact's signature or actions under the authority granted in this Power may be accepted by third parties as fully authorized by me and with the same force and effect as if I were personally present, competent, and acting on my own behalf;
- (c) No person who acts in reliance upon any representation of my Attorney-in-Fact as to the scope of my Attorney-in-Fact's authority granted under this document shall incur any liability to me, my estate, my heirs, successors, or assigns for permitting my Attorney-in-Fact to exercise any such power, nor shall any person who deals with my Attorney-in-Fact be responsible to determine or ensure the proper application of funds or property.

TERMINATION

I revoke all prior general Powers of Attorney that I may have executed. I retain the right to revoke or amend this Power and to substitute other Attorney-in-Fact(s) in place of any of those named in this Power. This Power shall continue in full force and effect until I, personally, have signed a written document specifically revoking this Power. Amendments of this Power shall be made in writing by me personally. Any revocation or amendment of this Power must be recorded in the same County or Counties as the original, if the original is recorded.

## DURATION OF ATTORNEY-IN-FACT'S AUTHORITY

Any Attorney-in-Fact named in this Power shall fail or cease to serve when:

- (a) The Attorney-in-Fact dies, resigns, is adjudged incapacitated by a court, cannot be located upon reasonable inquiry, or if at one time was the principal's spouse and legally is no longer the principal's spouse; or
- (b) A physician familiar with the condition of the current Attorney-in-Fact certifies in writing to the immediate Successor Attorney-in-Fact that the current Attorney-in-Fact is unable to transact a significant part of the business required under this Power of Attorney;

The death of any Attorney-in-Fact named in this Power may be established by the affidavit of any person named herein as an Attorney-in-Fact; however, this is not intended to be the exclusive means for establishing the death of any Attorney-in-Fact;

The resignation of any Attorney-in-Fact hereunder may be established by a written document bearing the Attorney-in-Fact's notarized signature to that effect; however, this is not intended to be the exclusive means for establishing the resignation of any Attorney-in-Fact;

The inability to locate any Attorney-in-Fact upon reasonable inquiry may be established by the affidavit of any person named as an Attorney-in-Fact; however, this is not intended to be the exclusive means for establishing the inability to locate, upon reasonable inquiry, any Attorney-in-Fact;

In the event any individual named in this Power fails to, or ceases to serve as my Attorney-in-Fact, the individual shall have no further power under this instrument, except for any power as may be delegated to the individual by my then-acting Attorney-in-Fact. This shall be the case even if the individual shall reappear after establishing that she/he could not be located upon reasonable inquiry, or if she/he is subsequently able to transact business.

In the event that a proceeding is brought to establish a guardianship for me, I appoint the individual then acting, or eligible to act, as my Attorney-in-Fact under this Power to serve as guardian and to have responsibility for the care, custody, management, and supervision of my property and physical person.

## GENERAL PROVISIONS

Persons dealing with my Attorney-in-Fact may rely fully on a valid copy of this Power. The original and valid copies of this original instrument include my initials and a small bird representing the logo of Zivkovich Law Offices in the footer of each page of this instrument.



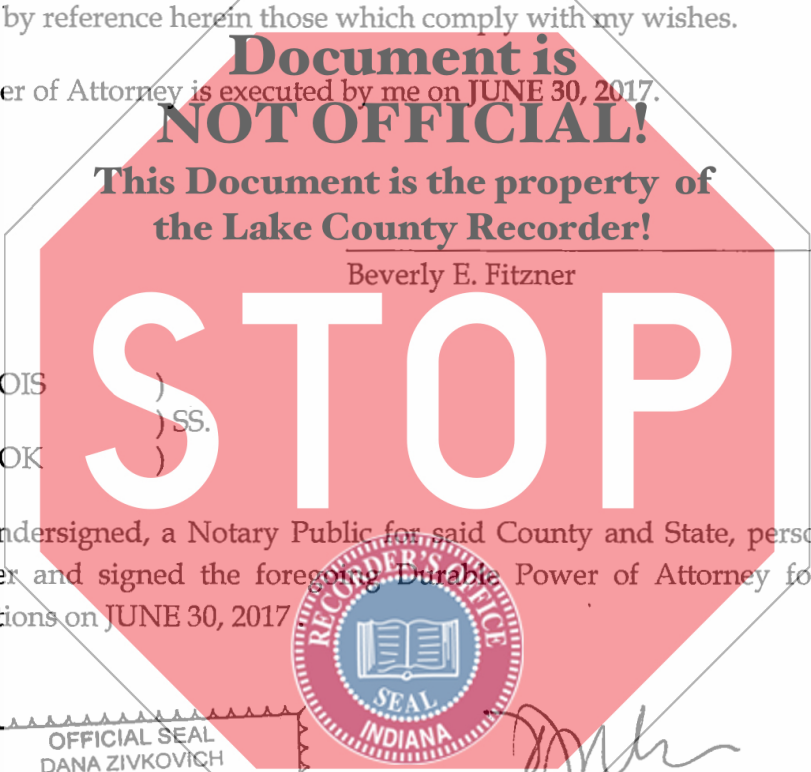
If any of the provisions of this Power are found to be invalid for any reason, this invalidity shall not affect any of the other provisions of this Power, and all invalid provisions shall be wholly disregarded;

All questions pertaining to validity, interpretation, and administration of this Power shall be determined in accordance with the laws of Indiana;

My Attorney-in-Fact shall not be liable to me or any of my successors in interest for any action taken or not taken in good faith, but shall be liable for any willful misconduct or gross negligence;

I have received from my attorney a copy of those sections of *Indiana Code 30-5-5* which are incorporated by reference in Powers Section of this Power. I have reviewed these powers and am incorporating by reference herein those which comply with my wishes.

This durable Power of Attorney is executed by me on JUNE 30, 2017.



*Handwritten signature and initials*

STATE OF ILLINOIS )  
                                  ) SS.  
COUNTY OF COOK )

Before me, the undersigned, a Notary Public for said County and State, personally appeared Beverly E. Fitzner and signed the foregoing Durable Power of Attorney for Property and Business Transactions on JUNE 30, 2017



*Handwritten signature of Dana Zivkovich*  
\_\_\_\_\_  
Dana Zivkovich, Notary Public  
Resident of Cook County, IL  
My commission expires: 10/30/17

This document prepared by: Dana Zivkovich, Esq.  
Zivkovich Law Offices  
(219) 232-4888

*Handwritten signature*  
Initialed \_\_\_\_\_

**EXHIBIT A**

**LEGAL DESCRIPTION**

LOT SIX (6), BLOCK TWELVE (12), WICKER PARK, IN THE TOWN OF MUNSTER, AS SHOWN IN PLAT BOOK 10, PAGE 40, IN LAKE COUNTY, INDIANA.

FOR INFORMATIONAL PURPOSES ONLY:

Common Address: 1729 Ridge Road, Munster, IN 46321  
PIN# 45-07-20-302-014.000-027

