STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2019 037372

2019 JUN 21 AM 9: 45

MICHAEL B. BROWN

Power of Attorney for Real Property

GREGORY L. GILBOE JOYCE KLISSER

The undersigned hereby nominates, constitutes, and appoints my sister: JOYCE KLISSER

whose address is 8535 Moraine Avenue, Munster, Indiana 46321, as my true and lawful attorney-in-fact to do and perform for me and in my name the following:

Transfer of Interest in Real Estate - To sell, convey, lease, grant an option to purchase, or otherwise transfer, for such consideration and upon such terms as my attorney-in-fact shall deem advisable, including a contract for conditional sale, and also to execute and deliver any deed, sales agreement, lease, contract and any other document(s) in such manner and form as may be necessary or required for my attorney-in-fact to transfer all or any part of my interest in the following located in Lake County, Indiana, and legally described as follows, to-wit:

The West 45 Feet of the East 88 feet of Lot 26 in Oak Park Addition to Hammond, as per plat thereof, recorded in Plat Book 16, Page 10, in the Office of the Recorder of Lake County, Indiana

Commonly known as: 254 Locust Street, Hammond, Indiana 46324 Parcel No.: 45-06-12-179-012.000-023

In furtherance of these powers I give my attorney in fact power to act on my behalf and to do for me and in my name those things which such attorney deems expedient to and necessary to effectuate the intent of this Power of Attorney, as fully as I could do for myself, reserving unto myself, however, the power to act on my own behalf and also to revoke the powers given in this instrument. Any act or thing lawfully done by my attorney-in-fact under this instrument shall be binding on me and on my heirs, assigns and legal

All persons, firms and corporations to whom this instrument may be delivered may rely on its being in effect and unrevoked by me unless I shall have executed a proper instrument of revocation and recorded it, or caused it to be recorded, in the Office of the Recorder of Lake County, State of Indiana.

Duration of Power of Attorney. This Power of Attorney is not terminated by my incapacity.

I affirm, under the penalties for perjury, that I have taken reasonable care to reduct each Social Security

number in this document, unless required by law.

STATE OF CALIFORNIA COUNTY OF ORANGE

Before me, the undersigned, a Notary Public in and for said County and State, this day of 2019, personally appeared Gregory L. Gilboe, the principal named above, signed this Power of Attorney, and acknowledged the execution of it, as the voluntary act and deed of the principal, for the uses and purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above

SGG ATTACHED ALEMVIEGGMENTARY. Resident of_ County

This instrument prepared by BARBARA M. SHAVER, Any #2111-45, 9013 Indianapolis Blvd., Highland, IN 46322

Community Title Company File No. 1910/44



California All-Purpose Acknowledgment

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 truthfulness, accuracy, or validity of that document.

State of California
County of California
On 06/04/19 before me, Kathy T. Huynh, notary public, personally appeared ***Gregory L. Gilboe***, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s)(is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/he/their authorized capacity(ies), and that by his/he/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
I certify UNDER PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal. Witness my hand and official s
Optional
Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent froudulent removal of this reattachment of this farm to another document.
Description of Attached Document
Title or Type of Document: Power Of Attorney For Real Property
Document Date:# of Pages:1
Signer(s) Other Than Named Above: