

POWER OF ATTORNEY

I, Jacob James Jones, a resident of Lake County, Indiana, do hereby appoint an attorney-in-fact ("Attorney") to act on my behalf, pursuant to Ind. Code § 30-5 (as it now exists or is hereafter amended). I name Lori Ann Jones, a resident of Lake County, Indiana, to serve as my Attorney. In the event of her death, resignation, refusal or inability to so act, I name Lindsay Marie Jones, a resident of Lake County, Indiana, to serve as my Attorney. I confer upon my Attorney the following powers, described in Ind. Code § 30-5-5 and incorporated herein by reference, to which I have placed my initials:

— Real Property. Authority with respect to real property transactions pursuant to Ind. Code § 30-5-5-2.

— Tangible Personal Property. Authority with respect to tangible personal property transactions pursuant to Ind. Code § 30-5-5-3.

— Bond, Share and Commodity. Authority with respect to bond, share and commodity transactions pursuant to Ind. Code § 30-5-5-4.

— Banking. Authority with respect to banking transactions pursuant to Ind. Code § 30-5-5-5, including, but not limited to, the power to enter into any safe deposit box that I could enter if personally present, to draw and to endorse checks on any bank account or upon any fund in which I may have an investment, to make, execute and endorse promissory notes and bills of exchange and to waive demand, presentment for payment, protest, notice of protest and notice of nonpayment of all such instruments.

— Business. Authority with respect to business operating transactions pursuant to Ind. Code § 30-5-5-6.

— Insurance. Authority with respect to insurance transactions pursuant to Ind. Code § 30-5-5-7.

— Beneficiary. Authority with respect to beneficiary transactions pursuant to Ind. Code § 30-5-5-8.

— Gifts. Authority with respect to gift transactions pursuant to Ind. Code § 30-5-5-9.

— Fiduciary. Authority with respect to fiduciary transactions pursuant to Ind. Code § 30-5-5-10.

— Claims and Litigation. Authority with respect to claims and litigation pursuant to Ind. Code § 30-5-5-11.

2021-043404

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GINA PIMENTEL  
RECORDER  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

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cc  
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# NOT AN OFFICIAL DOCUMENT

- Family Maintenance. Authority with respect to family maintenance pursuant to Ind. Code § 30-5-5-12.
- Military Service. Authority with respect to benefits from military service pursuant to Ind. Code § 30-5-5-13.
- Records, Reports and Statements. Authority with respect to records, reports, and statements pursuant to Ind. Code § 30-5-5-14, including, but not limited to, the power to prepare, sign, file, request, and examine tax returns, notices, and claims of all kinds with the Internal Revenue Service and all state, local, and foreign taxing authorities of all jurisdictions, to represent me in any audits and other matters pertaining to any taxes due or asserted to be due from me by any such jurisdiction or pertaining to the refund or claim of refund of any taxes, and to at any time perform any and all other acts before the taxing authorities of any jurisdiction, including specifically the execution of IRS Form 2848 and any other authorization forms as may be necessary to carry out the purposes of this delegation of authority.
- Estate Transactions. Authority with respect to estate transactions pursuant to Ind. Code § 30-5-5-15, including but not limited to, the power to deposit any assets or property owned by me in any trust, created by me for my benefit, now existing or which I may hereafter create, and subject such property to any such trust.
- Delegate. Authority with respect to delegating authority pursuant to Ind. Code § 30-5-5-18.
- Retirement Accounts. Authority with respect to retirement plans or accounts of any kind or description including, but not limited to, employee benefit trusts, Individual Retirement Accounts, 401(K) accounts, etc., and for all acts necessary to manage, maintain, open or close such accounts including the power to withdraw, select payment options, rollover or otherwise transfer the account and all actions attendant thereto.
- All Other Matters. Authority with respect to all other matters pursuant to Ind. Code § 30-5-5-19, except that this Power of Attorney confers no authority with respect to my health care.
- ① All of the Above Powers. Authority with respect to all powers set forth above.

I hereby ratify and confirm all that my Attorney may do or cause to be done by virtue hereof.

# NOT AN OFFICIAL DOCUMENT

If protective proceedings are instituted on my behalf or a guardian is requested on my behalf, I nominate my Attorney named herein to act on my behalf or as my guardian with respect to my property.

This Power of Attorney shall be effective immediately and shall not be affected by my mental or physical condition or incapacity and shall continue in effect until revoked in writing or until my death, whichever occurs first. A person may rely on this Power of Attorney without investigating its validity or effectiveness unless the person has actual knowledge of my revocation hereof or of my death.

I understand the full import of this Power of Attorney and execute this document as my free and voluntary act.

"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."  
PREPARED BY: JCF

Jacob James Jones  
Jacob James Jones

Dated: 4/14/2010

STATE OF INDIANA )  
                                  ) SS:  
COUNTY OF LAKE )

Subscribed and sworn to before me, a Notary Public, in and for said county and state, this 14th day of April, 2010.

My Commission Expires:

5-10-2014

County of Residence:

Lake

Rosemarie E. Moyer  
Notary Public  
Rosemarie E. Moyer  
Printed



This instrument was prepared by Angela S. Cash, Attorney at Law, Scopelitis, Garvin, Light, Hanson & Feary, P.C., 10 W. Market Street, Suite 1500, Indianapolis, Indiana 46204-2968, Telephone: (317) 637-1777