POWER OF ATTORNEY

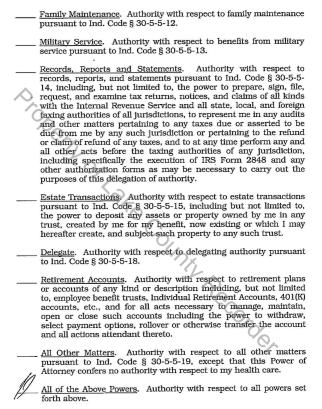
NOT AN OFFICIAL DOCUMENT

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:

ney the following powers, described in Ind. Code § 30-5-5 and porated 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.
<u>Claims and Litigation</u> . Authority with respect to claims and litigation pursuant to Ind. Code § 30-5-5-11.



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

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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.

PERJURY THAT I HAVE TAKEN REASON-	1 1
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SECURITY NUMBER IN THIS DOCUMENT,	
UNLESS REQUIRED BY LAW.	Jacob Jamés Jones
PREPARED BT:	Dated: 4\14\2010
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STATE OF INDIANA)	
') SS:	Co
COUNTY OF LAKE) .	
Subscribed and sworn t	o before me, a Notary Public, in and for said
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county and state, this Hthday	of <u>April</u> , 2010.
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My Commission Expires:	
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5-10-2014	goomsun V. II ou
	Notary Public
	Rosemarie E. Moyer
County of Residence:	MOSEMATIE E. MOYEL
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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