

POWER OF ATTORNEY
OF
VIRGINIA L. RIFE

ARTICLE I
DESIGNATION OF AGENT

CTN2105818

I, VIRGINIA L. RIFE, of Lake County, State of Indiana, being a mentally competent

adult, do hereby designate and appoint my son, RICHARD CLEVERINGA, of Lake County, State of Indiana, as my true and lawful Attorney-in-Fact, hereinafter sometimes referred to as my Agent, giving my Agent full authority and power to make financial, asset management, and personal decisions for me in my name, place and stead as authorized in this document.

If my Attorney-in-Fact as hereinabove designated and appointed should die, become mentally or physically incapacitated, resign, refuse to act, become unavailable, or become legally separated or divorced from me (in the event my Agent is my spouse), I then and do hereby designate and appoint my daughter, DIANA WINKEL, as my successor Attorney-in-Fact.

ARTICLE II
REVOCATION OF PRIOR POWERS

I hereby revoke all powers of attorney, general or limited, heretofore granted by me as principal and terminate all agency relationships created under any such prior powers, including those of all successor agents named or contemplated therein, if any.

ARTICLE III
GENERAL ASSET AND FINANCIAL POWERS

My Attorney-in-Fact is authorized, in his/her sole and absolute discretion from time to time and at any time, with respect to any and all of my property and interests in property, real, personal and mixed, and matters affecting my financial and personal interests, by way of

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CHICAGO TITLE INSURANCE COMPANY

Property of Lake County Recorder

illustration and not intending any limitation, to proceed on my behalf as stipulated under the

following sections of the Indiana Code governing powers of attorney:

- IC §30-5-5-2 Conferring general authority with respect to real property transactions.
- IC §30-5-5-3 Conferring general authority with respect to tangible personal property transactions.
- IC §30-5-5-4 Conferring general authority with respect to bond, share and commodity transactions.
- IC §30-5-5-4.5 Conferring general authority with respect to retirement plans.
- IC §30-5-5-5 Conferring general authority with respect to banking transactions.
- IC §30-5-5-6 Conferring general authority with respect to business operating transactions.
- IC §30-5-5-7 Conferring general authority with respect to insurance transactions.
- IC §30-5-5-7.5 Conferring general authority with respect to the handling of transfer on death transfers and payable on death transfers.
- IC §30-5-5-8 Conferring general authority with respect to beneficiary transactions.
- IC §30-5-5-9 Conferring general authority with respect to gift transactions.
- IC §30-5-5-10 Conferring general authority with respect to fiduciary transactions.
- IC §30-5-5-11 Conferring general authority with respect to claims and litigation.
- IC §30-5-5-12 Conferring general authority with respect to family maintenance.
- IC §30-5-5-13 Conferring general authority with respect to benefits from military service.
- IC §30-5-5-14 Conferring general authority with respect to records, reports, and statements.
- IC §30-5-5-15 Conferring general authority with respect to estate transactions.
- IC §30-5-5-18 Conferring general authority with respect to delegating authority.
- IC §30-5-5-19 Conferring general authority with respect to all other matters.

To transact any kind of business, including the receipt, recovery, collection, payment, compromise, settlement, or adjustment of accounts, legacies, bequests, distributions, interests,

VLR (V.L.R.)

employee benefits plans, 401K plans, individual retirement accounts (IRA's), annuities, pensions, SEP-IRA's, demands, debts, taxes, and obligations due and payable by or to me.

I hereby incorporate by reference all the powers granted an Attorney-in-Fact under IC §§30-5-5-2 to 30-5-5-19. However, I am specifically excluding IC §30-5-5-16 conferring general authority with respect to health care powers and IC §30-5-5-17 conferring general authority with respect to withdrawing or withholding of medical treatment on behalf of the principal from this power of attorney. I grant the powers enumerated in this power of attorney to RICHARD CLEVERINGA or his successor under this document.

**ARTICLE IV
SPECIFIC AUTHORITY TO REPRESENT PRINCIPAL
WITH INTERNAL REVENUE SERVICE**

I grant to my acting Power of Attorney the rights granted under the IRS Power of Attorney and Declaration Representative Form 2848 to have access to all of my files and records with the Internal Revenue Service Department, to secure copies of all prior income tax returns filed by me as well as gift tax returns and corporate tax returns filed by me. In addition, in the event that I am incapacitated, my acting Power of Attorney shall have the authority to sign all tax returns required on my behalf. My Power of Attorney is authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters, which would include the authority to sign any agreements, consent, or other documents. In addition, I grant my Power of Attorney the right to receive refund checks, the power to sign returns and the power to execute a request for disclosure of tax returns or return information.

**ARTICLE V
PROVISION APPLICABLE TO ARTICLE III AND ARTICLE IV**

With respect to Article III (general asset and financial powers) and Article IV (authority to represent me with Internal Revenue Service), it is to be understood that the authority I have

LAKE COUNTY, INDIANA, #021-52438, I
conferred to my Attorney-in-Fact in no way is intended to limit or restrict my own authority or
decision making capabilities covering such powers and authority as long as I remain mentally
competent.

FURTHERMORE, THIS POWER OF ATTORNEY AND THE AUTHORITY I HAVE
CONFERRED AND SPECIFIED UNDER ARTICLE III AND ARTICLE IV ABOVE SHALL
REMAIN IN FULL FORCE AND EFFECT UNTIL SUCH TIME AS I MAY HEREINAFTER
REVOKE THE SAME IN WRITING, PROVIDED FURTHER THAT THE SAME SHALL
NOT BE AFFECTED BY MY SUBSEQUENT DISABILITY, INCOMPETENCE, OR LAPSE
OF TIME.

**ARTICLE VI
THIRD PARTY RELIANCE**

No person who relies in good faith upon any representations by or authority of my
Attorney-in-Fact shall be liable to me, my estate, my heirs, or assigns for recognizing such
representations or authority.

**ARTICLE VII
NOMINATION OF GUARDIAN**

In the event a judicial proceeding is brought to establish a guardianship over my person
or property, I hereby nominate my Attorney-in-Fact, **RICHARD CLEVERINGA**, hereinabove
designated and appointed to be my guardian.

**ARTICLE VIII
EFFECTIVE DATE**

This power of attorney shall become effective upon my incapacity and disability wherein
I am no longer able to personally handle my financial and business affairs or take care of my
personal needs. I direct the named Attorney-in-Fact to secure a medical statement from my

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doctor with regard to my condition prior to assuming his/her authority under this document. This limitation as to the effective date of this Power of Attorney being restricted to my mental or physical disability, does not restrict or limit my authority to request that my Attorney-in-Fact proceed under this Power of Attorney and assume his/her designated responsibilities as set out in this document upon my request prior to any mental incapacity or physical disability, but rather as a matter of convenience on my behalf.

ARTICLE IX MISCELLANEOUS PROVISIONS

1. This durable power of attorney is intended to be valid and given full faith and credit in any jurisdiction or state in which it is presented.
2. My Attorney-in-Fact shall not be entitled to any compensation for services performed hereunder, but shall be entitled to reimbursement for all reasonable expenses incurred and paid, including transportation costs, as a result of carrying out any provisions of this instrument.
3. My Attorney-in-Fact, including his/her heirs, legatees, successors, assigns, personal representatives, and estate, acting in good faith hereunder, is hereby released and forever discharged from any and all liability (including civil, criminal, administrative, or disciplinary) and from all claims or demands of all kinds whatsoever by me or my heirs, legatees, successors, assigns, personal representatives, or estate arising out of the acts or omissions of my Attorney-in-Fact, except for willful misconduct or gross negligence.
4. My Attorney-in-Fact is authorized to make photocopies of this instrument as frequently and in such quantity as he/she shall deem appropriate. Each photocopy shall have the same force and effect as any original.

5. If any part or provision of this instrument shall be invalid or unenforceable, such part or provision shall be ineffective to the extent of such invalidity or unenforceability only without affecting the remaining parts or provisions of this instrument in any way.

6. This instrument and actions taken by my Attorney-in-Fact properly authorized hereunder shall be binding upon me, my heirs, successors, assigns, legatees, guardians, and personal representatives.

7. I direct that this Power of Attorney be given full faith and credit in all of the fifty (50) states of the United States of America, and be honored by all banking institutions and brokerage firms regardless of the state laws in which the financial institution is located. I further direct my Power of Attorney to take whatever action is necessary to conduct my business throughout the United States of America with this valid Power of Attorney and in any foreign country in which I hold assets.

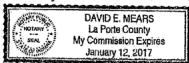
IN WITNESS WHEREOF, I have hereunto executed this Durable Power of Attorney this 3rd day of August, 2016.

Virginia L. Rife
VIRGINIA L. RIFE

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared Virginia L. Rife, who acknowledged the execution of the foregoing General Durable Power of Attorney this 3rd day of August, 2016.

WITNESS my hand and notarial seal.



David E. Mears
David E. Mears, Notary Public

This instrument prepared by: David E. Mears, Attorney at Law, Atty. No. 9119-45, 3527 Ridge Road, Highland, Indiana 46322, (219) 972-0990