

## GENERAL DURABLE POWER OF ATTORNEY

By this General Durable Power of Attorney, I, MARTIN F. SERENCES, of Lake County, State of Indiana, being at least 18 years of age and mentally competent, name an attorney-in-fact with power to act on my behalf pursuant to Indiana Code (I.C.) 30-5, as it exists now and as it shall be amended in the future.

### 1. APPOINTMENT:

I do hereby designate SHERRY L. SERENCES, of Lake County, State of Indiana, my true and lawful attorney-in-fact.

### 2. POWERS:

I give to my attorney-in-fact, including any successor attorney-in-fact, the powers specified in this section to be used on my behalf, provided, however, that my attorney-in-fact shall not have any power which would cause my attorney-in-fact to be treated as the owner of any interest in my property and which would cause that property to be taxed as owned by the attorney-in-fact.

- 2.1 REAL PROPERTY. Authority with respect to real property transactions pursuant to I.C. 30-5-5-2 (NOTE: IF THIS PROVISION IS APPLICABLE, THIS INSTRUMENT MUST BE RECORDED.)
- 2.2 TANGIBLE PERSONAL PROPERTY. Authority with respect to tangible personal property transactions pursuant to I.C. 30-5-5-3.
- 2.3 BONDS, SHARES, AND COMMODITIES. Authority with respect to bond, share, and commodity transactions pursuant to I.C. 30-5-5-4. This authority shall include the power to purchase United States Government obligations which are redeemable at par in payment of estate taxes imposed by the United States Government.
- 2.4 RETIREMENT PLANS. Authority with respect to retirement plans, including retirement plans established or operated in Indiana or other jurisdictions, pursuant to I.C. 30-5-5-4.5.
- 2.5 BANKING. Authority with respect to banking transactions pursuant to I.C. 30-5-5-5, including but not limited to, the authority to have access to any and all safe deposit boxes in my name, and to open, inspect, inventory, place items in or remove items from, and close said safe deposit boxes.
- 2.6 BUSINESS. Authority with respect to business operating transactions pursuant to I.C. 30-5-5-6.
- 2.7 FINANCIAL EXPLOITATION. Authority with respect to financial exploitation of the principal pursuant to I.C. 30-5-5-6.5.
- 2.8 INSURANCE. Authority with respect to insurance transactions pursuant to I.C.

(11)

22-34385

# NOT AN OFFICIAL DOCUMENT

30-5-5-7. This authority shall include full power to apply for and otherwise deal with medicare and medicaid benefits.

- 2.9 TRANSFERS ON DEATH/PAYABLE ON DEATH TRANSFERS.** Authority with respect to transfer on death or payable on death transfers pursuant to I.C. 30-5-5-7.5.
- 2.10 BENEFICIARIES.** Authority with respect to beneficiary transactions pursuant to I.C. 30-5-5-8.
- 2.11 GIFTS.** Authority with respect to gift transactions pursuant to I.C. 30-5-5-9, including authority to make gifts to my descendants and to the spouses of my descendants, including my attorney-in-fact, in any amount as my attorney-in-fact may deem to be in my best interest, considering my history of making such gifts and my estate and tax planning. In addition, I give authority to my attorney-in-fact to engage in asset protection planning relating to my eligibility for public benefits, including but not limited to Medicaid.
- 2.12 FIDUCIARIES.** Authority with respect to fiduciary transactions pursuant to I.C. 30-5-5-10.
- 2.13 CLAIMS AND LITIGATION.** Authority with respect to claims and litigation pursuant to I.C. 30-5-5-11.
- 2.14 FAMILY MAINTENANCE.** Authority with respect to family maintenance pursuant to I.C. 30-5-5-12.
- 2.15 MILITARY SERVICE.** Authority with respect to benefits from military service pursuant to I.C. 30-5-5-13.
- 2.16 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.
- 2.17 ELECTRONIC RECORDS, REPORTS AND STATEMENTS.** Authority with respect to electronic records, reports and statements pursuant to I.C. 30-5-5-14.5.
- 2.18 ESTATE TRANSACTIONS.** Authority with respect to estate transactions pursuant to I.C. 30-5-5-15.
- 2.19 AUTOPSY AND FUNERAL PLANNING.** Authority with respect to requesting an autopsy, making plans for the disposition of my body as provided in I.C. 30-5-5-16(b)(6)-(7), as amended, including execution of a funeral planning declaration on my behalf in accordance with I.C. 29-2-19.
- 2.20 DELEGATING AUTHORITY.** Authority with respect to delegating authority in writing to one (1) or more persons as to any or all powers given to the attorney-in-fact by this General Durable Power of Attorney document, pursuant to I.C. 30-5-5-18.

# NOT AN OFFICIAL DOCUMENT

- 2.21 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.

Notwithstanding the foregoing: (1) In no event shall my attorney-in-fact have the power to benefit himself or herself or any other person in any way that could result in any part of my property to be includable in such attorney-in-fact's gross estate for federal estate tax purposes, or cause any part of my property to be deemed to be the subject of a taxable gift made by such attorney-in-fact personally. (2) In no event shall my attorney-in-fact have the power to make any payment or application which would discharge any legal obligations of my attorney-in-fact personally. (3) In no event shall my attorney-in-fact possess or have the power to exercise any incident of ownership with respect to any policy I own insuring the life of my attorney-in-fact.

I hereby ratify and confirm all that my attorney-in-fact shall do by virtue of the above powers.

**3. EFFECTIVE DATE:**

This Power of Attorney shall become effective on the date of its execution and shall not be affected by my subsequent disability or incapacity.

**4. TERMINATION:**

I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until I have signed a written instrument of revocation identifying this Power of Attorney and delivered the same to my attorney-in-fact; provided, however, that if this Power of Attorney was recorded, then the instrument of revocation must be recorded in the same Recorder's Office as this Power of Attorney was recorded (which, if different from the Recorder's Office of the county of my domicile, will require recording of the instrument of revocation in the Recorder's Office of the county of my domicile and the Recorder's Office where this Power of Attorney was recorded) and must reference the book and page or instrument number where this Power of Attorney is recorded.

FURTHER, I AGREE TO INDEMNIFY AND HOLD HARMLESS ANY PERSON WHO, IN GOOD FAITH, ACTS UNDER THIS POWER OF ATTORNEY OR TRANSACTS BUSINESS WITH MY ATTORNEY-IN-FACT IN RELIANCE UPON THIS POWER WITHOUT ACTUAL KNOWLEDGE OF ITS REVOCATION.

**5. GUARDIANSHIP:**

In the event a judicial proceeding is brought to establish a guardianship for me, I hereby appoint the individual then acting as my attorney-in-fact, pursuant to the foregoing provisions of this Power of Attorney, to serve as guardian to have responsibility for the care, custody, and management of my property, and to have responsibility for the care, custody, and supervision of my physical person.

# NOT AN OFFICIAL DOCUMENT

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 21 day of October, 2022.

Martin F. Serences

MARTIN F. SERENCES

Soc. Sec. No.: XX-XX-3476

STATE OF INDIANA )  
                                  ) SS:  
COUNTY OF LAKE )

Before me, a Notary Public, in and for said County and State this \_\_\_ day of October, 2022, personally appeared MARTIN F. SERENCES and acknowledged the execution of the above and foregoing General Durable Power of Attorney for the uses and purposes set forth therein.

WITNESS my hand and notarial seal this 21 day of October, 2022.

Lori S. Mauk  
Notary

Public

A Resident of Lake County

My Commission Expires: MAUK  
Notary Public  
Lake County, State of Indiana  
Commission No. \_\_\_\_\_  
Commission Expires July 29, 2023

This Instrument Prepared By:

Alexander Kutanovski  
Attorney at Law  
1504 N. Main Street  
Crown Point, IN 46307

I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. *MAUK*

