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TOTAL FEES: 25.00
BY: SP
PG #: 5

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
GINA PIMENTEL
RECORDER

DURABLE POWER OF ATTORNEY

I, Berniece J. Gostylo, being at least 18 years of age and mentally competent, do hereby designate and appoint Mary Jo Kuper, my true and lawful attorney-in-fact.

If my original attorney-in-fact fails or ceases to serve as my attorney-in-fact, I name Michael J. Petrunich as my successor attorney-in-fact.

I. AUTHORITY OF SUCCESSOR ATTORNEY-IN-FACT: A successor attorney-in-fact shall have the authority to act when his/her predecessor:

- (1) dies;
- (2) resigns or is unwilling to discharge the duties of his/her appointment;
- (3) is adjudged incapacitated by a court;
- (4) cannot be located upon reasonable inquiry;
- (5) was at one time the principal's spouse and the marriage was dissolved or annulled; or
- (6) if a physician familiar with the condition of the predecessor certifies in writing that the predecessor is unable to discharge the duties of his/her appointment.

Pursuant to I.C. 30-5-8-7 the occurrence of any of the above conditions may be established by my successor attorney-in-fact by an affidavit executed pursuant to I.C. 30-5-8-7. Any third party relying in good faith upon such an affidavit is immune from liability resulting from the acceptance or direction from the successor attorney-in-fact.

In the event any individual named herein fails to serve, or ceases to serve, as my attorney-in-fact, such individual shall have no further power under this instrument (except for such power as may be delegated to such individual by my then acting attorney-in-fact). This shall be the case even if such individual shall reappear after a successor has begun to act.

II. POWERS: I give to my attorney-in-fact the powers herein specified to be used on my behalf. I am incorporating by reference herein those powers that comply with my wishes in accordance with the manner prescribed by Indiana Code 30-5-5. My attorney-in-fact shall have the following powers:

Community Title Company
File No. 2025455

Initial here *BJG*

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

Tangible Personal Property Transactions. Authority with respect to tangible personal property pursuant to Ind. Code 30-5-5-3;

Bonds, Commodities and Shares Transactions. Authority with respect to bonds, commodities and shares pursuant to Ind. Code 30-5-5-4;

Retirement Plans. Authority with respect to retirement plans pursuant to Ind. Code 30-5-5-4.5

Banking. Authority with respect to banking transactions pursuant to Ind. Code 30-5-5-5;

Business Operating Transactions. Authority with respect to business operating transactions pursuant to Ind. Code 30-5-5-6;

Insurance Transactions. Authority with respect to insurance transactions pursuant to Ind. Code 30-55-7; (This authority shall include the right to negotiate insurance contracts, to change ownership of any policy owned by me, or change, directly or indirectly, the beneficiary of any policy insuring my life to any natural person and to make any elections regarding death benefits.)

Transfer on Death Transfers. Authority with respect to transfer on death transfers pursuant to Ind. Code 30-5-5-7.5;

Beneficiary Transactions. Authority with respect to beneficiary transactions pursuant to Ind. Code 30-5-5-8;

Gift Transactions. Authority with respect to gift transactions pursuant to Ind. Code 30-5-5-9; (This authority shall include the power to make spousal or non-spousal gifts, in trust or otherwise, of property to my attorney-in-fact or others, without limitation as to amounts, in excess of or less than the amount excluded from gifts under Section 2503(b) of the Internal Revenue Code of 1986, as amended, or any successor thereto.)

Fiduciary Transactions. 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;

Family Maintenance. Authority with respect to family maintenance pursuant to Ind. Code 30-5-5-12;

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Military Service Benefits. Authority with respect to benefits from military service pursuant to Ind. Code 30-5-5-13, including the full power to apply for benefits from and otherwise deal with matters concerning the Veterans Administration;

Records, Reports and Statements. Authority with respect to records, reports and statements pursuant to Ind. Code 30-5-5-14, including the power to execute on my behalf any specific power of attorney required by any taxing authority which is needed to allow my attorney-in-fact to act on my behalf before that taxing authority on any return or issue;

Estate Transactions. Authority with respect to estate transactions pursuant to Ind. Code 30-5-5-15;

Delegation. Authority with respect to delegating authority pursuant to Ind. Code 30-5-5-18; (I specifically authorize my attorney-in-fact to delegate in writing to one or more persons any or all of the powers granted to the attorney-in-fact in this power of attorney.)

All Other Matters. Authority with respect to all other matters pursuant to Ind. Code 30-5-5-19.

Electronic Communications. I hereby grant to my attorney-in-fact specific authority to (a) access the content of all electronic communications sent to or received by me pursuant to IC 32-39-2-6 and (b) over all of my digital assets and to act on my behalf on a catalogue of electronic communications sent to or received by me and the digital assets, other than the content of the electronic communications pursuant to IC 32-39-2-7.

In addition to the foregoing, without limiting the generality of the powers granted herein, I specifically grant my attorney-in-fact the power:

To create trusts with my property for me and/or others and to use any other devices I might use myself if I were competent, for the purpose of providing for me or any of the members of my family, for the purpose of reducing tax liabilities, or for the purpose of preserving assets for my use or use by my family in the event that I might require long-term health care. In carrying out the foregoing powers, my attorney-in-fact shall be guided by the standard that these estate-planning powers are designed, in part, for the preservation of my assets. My attorney-in-fact may exercise any estate planning power without any prohibition against self-dealing. In connection with this estate planning, or pursuant to any other power or authority contained in this power-of-attorney, my attorney-in-fact may purchase any type of property that is considered to be an exempt resource under any applicable law or regulation for Medicaid purposes or in respect of any other public or government program.

To represent me in all matters relating to taxation, whether by the Federal government, the government of any state or any local government unit and to prepare, sign and file any documents or forms that may be required in these matters.

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To make and sign a power of attorney or authorization to deal with the Internal Revenue Service of the Department of the Treasury, state, local or other tax authorities, including Forms 2848 and 2848-D of the Internal Revenue Service. I authorize my attorney-in-fact to act fully with regard to any tax on income, employment, information, gift, estate, generation skipping transfer, Social Security, property, sale, employee, excise or any other tax of any type, federal, state or local, on Forms 1040, 709, 706, 706A, 706NA, 706GS, 843, 941, 1099, IT-40 or any other tax forms for years 1940 through 2050; and, to represent me before such taxing authorities. I authorize my attorney-in-fact to receive confidential information and to perform any and all acts that I can perform with respect to the above tax matters, including the power to receive and endorse refund checks and the power to sign tax returns.

III. GUARDIAN If it becomes necessary to secure the appointment of a guardian of my person or estate or if protective proceedings are filed on my behalf, I hereby request the appropriate probate court to appoint my then acting attorney-in-fact as my guardian or as the person to act on my behalf.

IV. FEES My attorney-in-fact shall not be entitled to a fee for services provided as my attorney-in-fact.

V. LIABILITY AND INDEMNITY My attorney-in-fact shall only be liable for actions undertaken in bad faith; provided, however, my attorney-in-fact shall be liable for the negligent exercise of the powers described herein if the exercise of such power involves self-dealing. I hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof. 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.

VI. EFFECTIVE DATE AND INCAPACITY This power of attorney shall be effective as of the date it is signed. My disability or incompetence shall not affect or terminate this Power of Attorney.

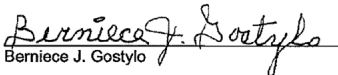
VII. REVOCAION I hereby reserve the right to revoke this power of attorney at any time. My attorney-in-fact shall have the power to revoke all powers of attorney previously executed by me. This power of attorney shall terminate upon the execution of a written revocation thereof which shall be transmitted to my former attorney or attorneys-in-fact. If the former power of attorney has been recorded, the revocation shall be recorded with the Recorder's Office of the County of my domicile.

VIII. ALL PRIOR POWERS OF ATTORNEY REVOKED All powers of attorney executed by me prior to the date of this power of attorney are revoked.



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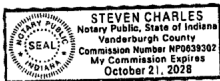
IN WITNESS WHEREOF, I have hereunto set my hand and seal to this Power of Attorney, consisting of five (5) pages, and for the purpose of identification have placed my initials at the foot of each preceding page, all this 13th day of May, 2021, in Vanderburgh, Indiana.


Berniece J. Gostylo

STATE OF INDIANA)
) SS:
COUNTY OF VANDERBURGH)


Before me, the undersigned, a Notary Public in and for said State, personally appeared Berniece J. Gostylo and acknowledged the execution of the above and foregoing Power of Attorney to be her voluntary act and deed.

IN WITNESS WHEREOF, I do hereby set my hand and notarial seal this 13th day of May, 2021.




Steven T. Charles

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.


Steven T. Charles

This instrument prepared by:

Steven T. Charles
Sheets, Charles & Charles
Elder Law Attorneys
2801 Lincoln Ave.
Evansville, IN 47714
Tel. (812) 476-2762