

respect to any policy of insurance of my life and in that capacity to exercise my right, privilege or option which I may have thereunder or pertaining thereto, excluding, however, their right to change the beneficiary, the right to change the method of payment of the insurance proceeds, and the right to make a cash surrender of the policy as distinguished from a surrender of the policy for loan, conversion, or other purpose as provided therein.

GIVING AND GRANTING unto my said attorney full power and authority to do and perform all and every act, deed, matter, and thing whatever in and about my estate, property and affairs as fully and effectual to all intents and purposes as I might or could do in my own proper person if personally present, the above specially enumerated powers being in aid and exemplification of the full, complete, and general power herein, granted and not in limitation or definition thereof; and hereby ratifying all that my said attorney shall lawfully do, or cause to be done by virtue of these presents.

And I hereby declare that any act or thing lawfully done hereunder by my said attorney shall be binding on myself, and my heirs, legal and personal representative, and assigns, whether the same shall have been done before or after my death, or other revocation of this instrument, unless and until reliable intelligence or notice thereof shall have been received by my said attorney; and whether or not, I, the grantor of this instrument, shall have been reported or listed either officially or otherwise, as "missing" or "missing in action" as those words are used in military parlance, it being the indendent hereof that such status designation shall not bar my attorney from fully and completely exercising and continuing to exercise any and all powers and herein granted, and that such reports of "missing" or "missing in Action" shall neither constitute nor be interpreted as constituting notice of my death nor operate to revoke this instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 18th day of DECEMBER nineteen hundred and fifty-one.

Joseph M. Jans (SEAL)
Signature of Grantor
JOSEPH M. JANS

WITNESS:

Joseph K. Casey
JOSEPH K. CASEY 14 418 916 ADDRESS USAF
Donald W. Hughes
DONALD W. HUGHES 13 401 361 ADDRESS USAF
Claire Gelber
CLAIRE GELBER 50 JOHN STREET SPOTSWOOD, N. J.

STATE OF NEW JERSEY)
COUNTY OF MIDDLESEX) SS

BE IT REMEMBERED, that on this 18th day of DECEMBER, 1951, before me, the subscriber, a NOTARY PUBLIC, personally appeared JOSEPH M. JANS, who I am satisfied is the person mentioned in the within Power of Attorney, and I having first made known to him the contents thereof, he did acknowledge that he signed, sealed and delivered the same as and for his voluntary act and deed, for the uses and purposes therein expressed.

ISABEL LEFKOWITZ
NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES MAR. 27, 1955

Isabel Lefkowitz
Recorded January 2nd. 1952 at
10:00 A. M. #58