POWER OF ATTORNEY

00739944

POWER OF ATTORNEY, made this 18th day of August, 2000.
The undersigned, **BOOKER T. CARTER**, one of the owners of the following-described property:

42652668 42

Lot 16 in the Subdivision of Block 66 (Except the East 110 feet of the South 368.32 feet and the North 66 feet of the West 17.07 feet thereof) in Chicago Heights in the Southwest 1/4 of Section 21, Township 35 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

32-21-313-003

and commonly known as 1521 Hanover, Chicago Heights, Illinois 60411, hereby authorizes **PRENSOLA CARTER**, to execute any and all documents, including the Warranty Deed, for the sale of the above described real estate.

WITNESS TO THE MARK:

Patricia Deckinga

Wilma Schuchardt

His

X
_____
Mark

SS No. *427-32-6775*

STATE OF ILLINOIS)
) ss.
COUNTY OF C O O K)

The undersigned, a Notary Public in and for the above County and State, certifies that **BOOKER T. CARTER**, is known to me to be the same person whose name is subscribed as principal to the foregoing Power of Attorney, appeared before me and the additional witness in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth (, and certified to the correctness of thet signature(s) of the agent(s)

Dated: August 18, 2000

"OFFICIAL SEAL"
Angelo A. Ciambrone
Notary Public, State of Illinois
My Commission Expires 5/17/2001

Angelo A. Ciambrone
_____
Notary Public

The undersigned witness certifies that **BOOKER T. CARTER** known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory.
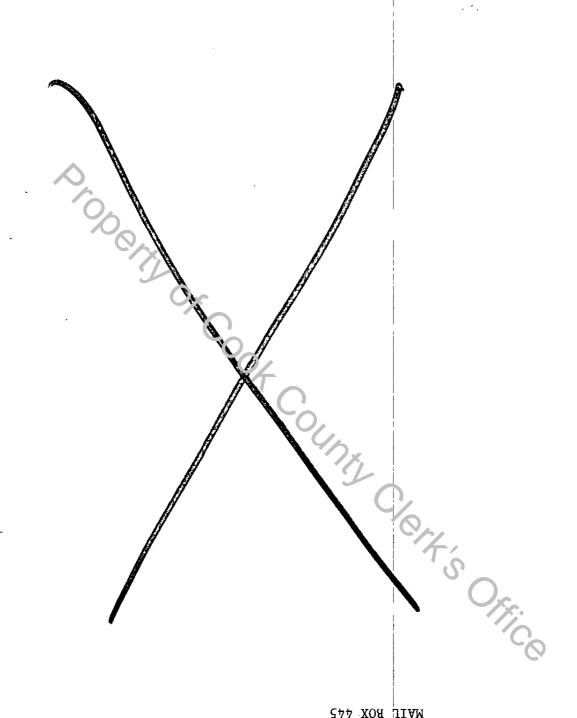
Dated: August 18, 2000

Patricia Deckinga
_____
Witness

PREPARED BY : ANGELO A CIAMBRONE
1515 HALSTED
Chicago Hts Il 60411

MAIL BOX 445

00739944