

UNOFFICIAL COPY

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2000-01-28 10:55:41
Cook County Recorder 23.50



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MAIL TO PROPERTY

Recording Requested by/Return to:
Merrill Lynch Credit Corporation
4802 Deer Lake Drive East
Jacksonville, FL 32246
(904) 218-6000
Attn: Post Closing Department

29-33-302-023
Parcel I.D. Number

Power of Attorney

I, Marilyn A. Dolci 726 Fitzhenry Ct. Glenwood, Ill.
(insert name and address of principal)

have made, constituted and appointed and by these presents do make, constitute and appoint
James D. Dolci 726 Fitzhenry Ct. Glenwood, Ill.
(insert name and address of agent or of each agent)

as my true and lawful attorney for me and in my name, place and stead, to execute and deliver a promissory note or loan agreement, to secure said note or agreement by executing and delivering a pledge/security agreement to pledge securities and/or to execute and deliver a Mortgage/Deed of Trust/Deed to Secure Debt/Security Agreement encumbering the following described property ("Property"): (Insert or attach full legal description not street address.)

Lot 540 in Glenwood Manor Unit #9, a subdivision of part of the northeast quarter of the north west quarter of section 4, township 35 North and part of the south 1/4 of 1039.40 feet of the south west quarter of section 32, township 36 North, Range 14 EAST of the third principal meridian, in Cook County, Illinois
and to execute and deliver any and all documents necessary and required by the lender in connection with any or all of the above-referenced instruments.

29-33-302-023

I further grant and give my Attorney-in-Fact full authority and power to do and perform any and all other acts necessary or incident to the performance and execution of the powers I have expressly granted, with power to do and perform all acts authorized hereby, as fully to all intents and purposes as I might or could do if personally present.

I hereby ratify and confirm all acts whatsoever that my Attorney-in-Fact, as my agent, shall or may do by virtue of this Power of Attorney.

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I hereby agree and represent to those persons dealing with my Attorney-in-Fact that this Power of Attorney will not terminate upon my subsequent disability or incompetence and may be voluntarily revoked only by a written instrument of revocation filed for record in the recording office of the County in which the Property is located.

IN WITNESS WHEREOF, I have executed this Power of Attorney on Set Jan 8 2000

Witness: James Dolci

Name: JAMES Dolci
(Type or print)

Witness: Marilyn A. Dolci

Name: Marilyn A. Dolci
(Type or Print)

Witness: Tim Woboszyn

Name: Tim Woboszyn
(Type or print)

STATE OF Illinois

COUNTY OF Cook

On 8th JAN, 00, before me, the undersigned, a Notary Public in and for said state, personally appeared Marilyn Dolci, personally known to me (or proved to me on the basis of satisfactory evidence in the form of _____) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) executed the instrument as his/her/their free act and deed.

WITNESS my hand and official seal.

My commission expires: 2-6-01

Lisa C. Crockett
Notary Public

[Revise acknowledgment as necessary to meet state law requirements]

This instrument was prepared by:

Marilyn A. Dolci
(signature)

Print name: Marilyn A. Dolci
Address: 726 Fitzhenry Ct.
61840 Wood Hill.

