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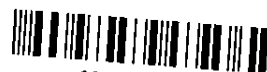
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9712/0172 05 001 Page 1 of 3

2002-07-30 12:01:37

Cook County Recorder

47.50



0020832618

STATUTORY POWER OF ATTORNEY

#02-06646

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL, OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THE POWERS WILL EXIST AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT IF YOU CIRCLE THAT PROVISION.

I James Green (principal),
of 3006 W. Wilson Ave, Chicago, County of Cook;
State of IL, appoint Thomas Green (agent) 3006 W. Wilson Ave, Chicago,
County of Cook State of IL as my agent to act for me in any lawful way with
respect to the powers initialed below

TO GRANT ONE OR MORE OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF EACH POWER YOU ARE GRANTING.

TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF IT. YOU MAY, BUT NEED NOT, CROSS OUT EACH POWER WITHHOLD.

29.
Initials

Initials

- 1. Real property transactions**
- 2. Tangible personal property transactions
- 3. Stock and bond transactions.
- 4. Commodity and options transactions.
- 5. Banking and other financial institution transaction **
- 6. Business operating transactions.
- 7. Insurance and annuity transactions.

- 8. Estate, trust, and other beneficiary
- 9. Claims and litigation
- 10. Personal and family maintenance
- 11. Benefits from social security, Medicare, Medicaid or other governmental programs, or military service.
- 12. Retirement plan transactions.
- 13. Tax matters.

SPECIAL INSTRUCTIONS:

ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.

Not applicable

Lawyers Title Insurance Corporation

3/11

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This power of attorney will become effective (immediatcly) (immediately, and is not affected by my subsequent disability, incapacity or incompetency) (when I become disabled, incapacitated or incompetent) **CIRCLE ONE.**

I agree that any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective as to a third party until the third party learns of the revocation. I agree to reimburse the third party for any loss resulting from claims that arise against the third party of reliance on this power of attorney.

THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY SUBSEQUENT DISABILITY, INCAPACITY OR INCOMPETENCY OF THE PRINCIPAL.

This will certify that a true and correct signature of my agent hereinabove appointed is as follows to-wit:

James J. Green
(Signature of Agent in Fact)

N/A

(Signature of Alternate Agent in Fact)

In Witness of, I have hereto set my hand and seal this _____ day of _____, 2002.

IN PRESENCE OF:

THIS INSTRUMENT WAS DRAFTED BY:

JAMES J. GREEN
James J. Green
(Signature of Principal)

351-68-8605
(Social Security Number of Principal)

STATE OF: _____

COUNTY OF: _____

This document was acknowledged before me this 23rd day of July, 2002.

By: JAMES J. GREEN
(Name of Principal)

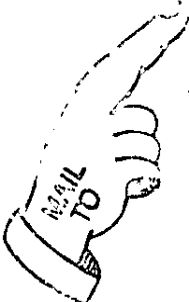


Lynette Andrews
Notary Public, State of Illinois

My Commission 1-11-06

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITY OF AN AGENT.

PREPARED BY AND MAIL TO:
JAMES J. GREEN
3006 W. WILSON AVE
CHICAGO, IL 60625



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Property Address: 4410 N. DOVER
CHICAGO, IL 60640

PIN #: 14-17-121-026

Lot 1 in the Resubdivision of Lots 25, 26, 27, 28 and 29 in Sunnyside Addition to Sheridan Park, in the West 1/2 of the Northwest 1/4 of Section 17, Township 40 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Property of Cook County Clerk's Office

CASE NUMBER 02-06646