## UNOFFICIAL COPY

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POWER OF ATTORNEY FOR BORROWER

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STATE OF Alling  COUNTY OF Cool  PATRICIA J. STILES	0030173515
I, tames A Bons, residing at 62/5, Delph, it.  City of long Kelley State of Illing, do hereby make, co appoint the following as my true and lawful attorney-in-fact:	nstitute and 2pg
1. (Check here if individual) James A Burne, resi	ding 2t
2. (Check here if law Firm): The law firm of whose difference is whose whose difference is whose difference is whose whose difference is whose difference is whose whose whose difference is whose	se business
The above referenced attorney(s)-in-fact may act for me and in my name, place	
and on my behalf, and for my use and benefit:  1. To borrow a sum of money not to exceed premises owned (or to be owned) by me and described as	curity of the
, more fully described in the attached Exhibit. A", from  To purchase the property described in Paragraph   at a purchase price poly	o exceed.
3. To execute, acknowledge and deliver a promissory note or notes for the repay	yme at of
amount referred to in Paragraph 1, and to execute, acknowledge and deliver a ton the aforesaid property to secure the payment of said sum referred to in Para on like term with the note or notes.	
4. To execute, acknowledge and deliver any and all other documents required in with said loan including, but not necessarily limited to Deeds, Disclosure Staten	

Settlement Statements:

5. To receive checks or cash or any payments to be made to me in connection with said loan

whether for adjustment of taxes, insurance premiums, surplus loan proceeds or otherwise:

- 6. To make any adjustments to documents which may be required at closing including, but not necessarily limited to, the Settlement Statement, Disclosure Statement or otherwise:
- 7. To do any and all other acts which may be necessary or required to close the above referenced loan.

## UNOFFICIAL COPY 173515

The rights, powers and authority of said attorney-in-fact granted in this instrument shall commence and be in full force and effect as of the date of the date of the execution of this instrument, and such rights, powers and authority shall remain in full force and effect thereafter until I give notice in writing that such power is terminated, altered, revoked or amended.

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The rights, powers and authority of said attorney-in-fact granted in this instrument shall not terminate upon my death, disability or incompetence.
Dated: 1/30/03 Patricia / Stiles
Vitness: 1-30-03
State of Thingis
County of Costs On this 30 th day of Jan
before me personally appeared  PATRICIA  T-  57:455
to me known to be the person who executed the
foregoing instrument, and acknowledge that he
executed the same as his free act and leed Seal (signed)
Notary Public
OFFICIAL SEAL  ROBERT M BONO  NOTARY PUBLIC, STATE GF ILLINOIS  MY COMMISSION EXPIRES: 02/03/03
MY COMMISSION EXPIRES:02/03/03