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PREPARED BY+

MICHAEL SPINGOLA 1815 WESTLEIGH BR CLENY, EWIL 600 25

0030365934

5879/8174 27 001 Page 1 of 2003-03-18 09:31:32 Cook County Recorder 28.00

LF240-04 R240-04

LIMITED POWER OF ATTORNEY

(With Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SECULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTOPNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEUGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. YOU MAY SPECIFY THAT CHESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANY THING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU, YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

TO ALL PERSONS, be it known, that I, Journe of 4543 Western of 4543 Western Chicago TL 60625 as Grantor, do hereby make and grant a limited and specific power of startey to Michael Spingola of 1815 Westleig KDr Glenview, IL 60025 and appoint and constitute said individual as my attorney-in-fact.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally; all with full power of

substitution and revocation in the presence: (Describe specific authority)

Signing of the mortgage documents on the tollowing

property: 4543 Western Chicago, IL 60625. This power

of attorney will be void after the mortgage transaction that

istaking place on Fe 628, 2003. This formwill also be used to take the title out of

The authority granted shall include such incidental acts as are reasonably required or necessary to carry out and perform the specific authorities and duties stated or contemplated herein.

My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interests as my attorney-in-fact deems advisable, and I thereupon ratify all acts so carried out.

I agree to reimburse my attorney-in-fact all reasonable costs and expenses incurred in the fulfillment of the duties and responsibilities enumerated herein.

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Special durable provisions:

This power of attorney shall not be affected by subsequent incapacity of the Grantor. This power of attorney may be revoked by the Grantor giving written notice of revocation to the attorney-in-fact, provided that any party relying in good faith upon this power of attorney shall be protected unless and until said party has either a) actual or constructive notice of revocation, or b) upon recording of said revocation in the public records where the Grantor resides.

Other terms:	
After the mortgage tranaction the	e Grantor is revoking
this power of attorney.	
41113 power - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	_
Signed under seal this 77H day of February	
Signed under seal this 77# day of Ferriage	, 20 <i>0</i> 3.
Signed in the presence of:	
	Danie Hatin Ours
Witness	yourse Marya Curry
Witness	Or Land
Witness Attorn	Town in Float
Wittless Attout	ney-in-Fact ()
Witness	
Willess	
Witness	
44 Yufe22	
τ_{\sim}	
State of Allenois	
County of Cook }	
On 2-7-03 before me,	
appeared JOANNE MARIE OYER	5
personally known to me (or proved to me on the basis of satisfa	f: ctury evidence) to be the person(s) whose
name(s) is/are subscribed to the within instrument and acknowle	
same in his/her/their authorized capacity(ies), and that by his/h	
person(s), or the entity upon behalf of which the person(s) acte	
WITNESS my hand and official seal.	, , , , , , , , , , , , , , , , , , , ,
	<i>'</i>
Signature Lalie C-Mah	7,0
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State of Level & KOTARY PUBLIC, STATE OF HEREON	7)
County of Cook SMY COUNTY LINE LINE 11/1020	
On 2-1-03 before me,	,
appeared MICHAEL SPINIGOLA personally known to me (or proved to me on the basis of satisfa	factory evidence) to be the person(s) whose
name(s) is/are subscribed to the within instrument and acknowledge.	
same in his/her/their authorized capacity(ies), and that by his/t	her/their signature(s) on the instrument the
person(s), or the entity upon behalf of which the person(s) acte	ed, executed the instrument.
WITNESS my hand and official seal.	
Signature Lasly . Mafa-	
CAAAAAAAAAAAAAAAAA	AffiantKnownProduced ID
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OFFICIAL SEAL	(Seal)
{ LESLIE C MAHN }	
LESLIE C MAHN Page 2	(Seal)
{ LESLIE C MAHN }	

STREET ADDRESS: 4543 WELLEN OFFICIAL COPY

CITY: CHICAGO COUNTY: COOK

TAX NUMBER: 14-18-121-003-0000

LEGAL DESCRIPTION:

LOT 49 IN E W ZANDER COMPANY'S SUBDIVISION OF SUB LOT 1 SUPERIOUR COURT DIVISION OF LOT 2 IN COURT PARTITION OF THE WEST HALF OF THE NORTH WEST QUARTER OF SECTION 18, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THAT PART LYING WEST OF A LINE 50 FEET EAST OF AND PARALLELL WITH THE WEST LINE OF SAID SECTION 18), IN COOK COUNTY, ILLINOIS.

Property of Cook County Clark's Office