

A240-10 R240-04

LIMITED POWER OF ATTORNEY

(With Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNLY 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. YOU MAY SPECIFY THAT THESE TOWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR TICOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING 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, David Hendler , of City of Chicago County of Cook, State of Illinois , as Granter, do hereby make and grant a limited and specific power of attorney to Theresa M. Hendler, my wife , of City of Chicago, County of Cook, State of IL. 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)

Execute any and all mortgage related documents from lender, wells Fargo relative to the refinancing of the real property commonly known as 1557 W. Carmen Chicago, IL. 60640 at the closing of said refinancing scheduled for on or about February 28, 2003, and for no other purpose.

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.

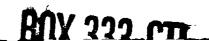
My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interests as my attorney-in-fact deems advisable, and I thereupon ratify all acts so carried out.

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

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:



UNOFFICIAL COPY

Signed under seal this 29th day of January Signed in the presence of:	, 2003 (year).
Michelloting Granfor	erisan Hendles
Witness Attorney-	in-Fact
Frank Modeuse Witness	
Witness Witness	
State of Alinois County of Cook	
On Jame and Java hefore me, appeared David Hendter personally known to me (or proved to me on the basis of satisfactory e is/are subscribed to the within instrument and acknowledged to me that h	
authorized capacity(ies), and that by his/her/sbar-signature(s) on the inbehalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.	nstrument the person(s), or the entity, upon OFFICIAL SEAL
Signature Marian M. Lazunneeke	MARIAN M ZDZIENNICKI NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 12/30/03 Afffant Arthornach Mariant Arthornach Mariant Arthornach Mariant Mari
	Type of ID(Seal)
State of Illinois County of Cook	(Scar)
On January 29, 2003 before me, appeared Theresam. Hendrer	C/L
personally known to me (or proved to me on the basis of satisfactory e is/are subscribed to the within instrument and acknowledged to me that h authorized capacity(ies), and that by his/her/their signature(s) on the i	e/she/they exect to the same in his/her/their
behalf of which the person(s) acted, executed the instrument.	§ OFFICIAL SEAL §
WITNESS my hand and official seal.	MARIAN M. ZUZIENNICKI S NOTARY PUBLIC, STATE OF ILLINOIS
Signature Marin M. Jozunnicki	MY COMMISSION EXPINE 1: 12/30/03 Affiant Known Produced ID
	Type of ID(Seal)
	(Seaf)

STREET ADDRESS: 165 U. N. E. F. C. AL COPY

CITY: CHICAGO COUNTY: COOK

TAX NUMBER: 14-07-409-023-0000

LEGAL DESCRIPTION:

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LOT 4 IN THE SUBDIVISION OF LOTS 3 AND 4 IN THE COURT PARTITION OF LOTS 8, 9 AND 10 IN BLOCK 3 IN ANDERSONVILLE, IN THE EAST HALF OF THE SOUTHEAST QUARTER OF SECTION 7, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clark's Office

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