



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 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. YOU MAY SPECIFY THAT THESE 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 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 Grantor, 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 1657 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:

BOX 332 CT

OT-1 8083479 E Guerrero 1 of 3 wu Abs

UNOFFICIAL COPY

Signed under seal this 29th day of January, 2003 (year).
Signed in the presence of:

Michelle King
Witness

David Hendler
Grantor

[Signature]
Witness

Theresa M Hendler
Attorney-in-Fact

Frank Rodause
Witness

Scott [Signature]
Witness

State of Illinois
County of COOK

On January 29, 2003 before me,
appeared David Hendler
personally known to me (or proved to me on the basis of satisfactory evidence) 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), or the entity upon
behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Signature Marian M. Zdziennicki

OFFICIAL SEAL
MARIAN M ZDZIENNICKI
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 12/30/03
Affiant Known Produced ID
Type of ID _____
(Seal)

State of Illinois
County of COOK

On January 29, 2003 before me,
appeared Theresa M Hendler
personally known to me (or proved to me on the basis of satisfactory evidence) 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), or the entity upon
behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Signature Marian M. Zdziennicki

OFFICIAL SEAL
MARIAN M ZDZIENNICKI
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 12/30/03
Affiant Known Produced ID
Type of ID _____
(Seal)

30324461

UNOFFICIAL COPY

STREET ADDRESS: 1651 W. CARMEN AVE.

CITY: CHICAGO

COUNTY: COOK

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

LEGAL DESCRIPTION:

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 Clerk's Office

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