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C.T.I./W  
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23104040

LF205-04  
R205-04

GENERAL 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, MICHELLE LAWLER  
of 190 MICHAUX ROAD RIVERSIDE, IL 60546  
the undersigned Grantor, do hereby make and grant a general power of attorney to MICHAEL CRONIN  
of 190 MICHAUX ROAD RIVERSIDE, IL 60546  
and do thereupon constitute and appoint said individual as my attorney-in-fact/agent.

My attorney-in-fact/agent shall act in my name, place and stead in any way which myself could do, if I were personally present, with respect to the following matters, to the extent that I am permitted by law to act through an agent:

(NOTICE: The grantor must write his or her initials in the corresponding blank space of a box below with respect to each of the subdivisions (A) through (O) below for which the Grantor wants to give the agent authority. If the blank space within a box for any particular subdivision is NOT initialed, NO AUTHORITY WILL BE GRANTED for matters that are included in that subdivision. Cross out each power withheld.)

- (A) Real estate transactions
  - (B) ~~Tangible personal property transactions~~
  - (C) ~~Bond, share and commodity transactions~~
  - (D) ~~Banking transactions~~
  - (E) ~~Business operating transactions~~
  - (F) ~~Insurance transactions~~
  - (G) ~~Gifts to charities and individuals other than Attorney in Fact/Agent~~
- (If trust distributions are involved or tax consequences are anticipated, consult an attorney.)

BOX 333-CP

# UNOFFICIAL COPY

- (H) ~~Claims and litigation~~
  - (I) ~~Personal relationships and affairs~~
  - (J) ~~Benefits from military service~~
  - (K) ~~Records, reports and statements~~
  - (L) ~~Full and unqualified authority to my attorney-in-fact/agent to delegate any or all of the foregoing powers to any person or persons whom my attorney-in-fact/agent shall select~~
  - (M) ~~Access to safe deposit box(es)~~
  - (N) ~~To authorize medical and surgical procedures (Pennsylvania only)~~
  - (O) ~~All other matters~~
- Durable Provision:**
- (P) **If the blank space in the block to the left is initialed by the Grantor, this power of attorney shall not be affected by the subsequent disability or incompetence of the Grantor.**
- Other Terms:**

My attorney-in-fact/agent hereby accepts this appointment subject to its terms and agrees to act and perform in said fiduciary capacity consistent with my best interests as he/she in his/her best discretion deems advisable, and I affirm and ratify all acts so undertaken.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Signed under seal this 18<sup>th</sup> day of June, 2003

Signed in the presence of:

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

Michelle Lawler  
Grantor

Michelle Lawler  
Attorney-in-Fact/Agent

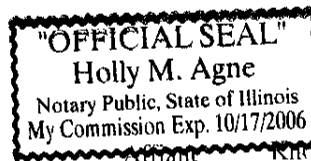
State of ILLINOIS  
County of COOK  
On June 18<sup>th</sup> 2003 before me,

Holly M. Agne  
Michelle Lawler

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 Holly M. Agne



\_\_\_\_\_  
Type of ID \_\_\_\_\_ Produced ID \_\_\_\_\_  
(Seal)

# UNOFFICIAL COPY

## "Exhibit A" Legal Description Rider

Loan No.: 28747911

Borrower Name(s): MICHAEL F. CRONIN and MICHELLE LAWLER

Property Address: 190 MICHAUX ROAD, RIVERSIDE, ILLINOIS 60546

THAT PART OF LOT 967 IN BLOCK 17 IN 3RD DIVISION OF RIVERSIDE DESCRIBED AS FOLLOWS: BEGINNING AT THE SOUTHEAST CORNER OF SAID LOT; THENCE RUNNING WESTERLY ALONG THE SOUTHERLY LINE OF SAID LOT TO THE SOUTHWEST CORNER OF SAID LOT; THENCE NORTHERLY ALONG THE WESTERLY (OR REAR) LINE OF SAID LOT A DISTANCE OF 56 FEET; THENCE EASTERLY IN A STRAIGHT LINE TO THE EASTERLY (OR STREET) LINE OF SAID LOT TO A POINT 75 FEET NORTH OF THE SOUTHEAST CORNER OF SAID LOT; THENCE ALONG THE EASTERLY (OR STREET) LINE OF SAID LOT TO A POINT OF BEGINNING IN SECTION 36, TOWNSHIP 39 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.  
15-36-102-024-0000

Property of Cook County Clerk's Office

WHEN RECORDS MAIL TO:  
MICHELLE LAWLER  
190 MICHAUX RD  
RIVERSIDE IL 60546