X134403

Eugene "Gene" Moore Fee: \$46.00 Cook County Recorder of Deeds Date: 07/30/2003 01:28 PM Pg: 1 of

KNOW ALL MEN BY THESE PRESENTS, that I, Cheryl A. Carlson of the County of Cook, State of Hingis, do hereby constitute and appoint Barry L. Carlson of the County of Cook, State of Illinois, my true and lawful attorney-in-fact, for me and in my steed, to make, execute, accept and deliver any contract, paper and other document in regard to the purchase and for refinancing of the below described property in the County of Cook, State of Illinois and more particularly described as follows:

BRIEF LEGAL: LOT 4 IN BLOCK 20 IN WINSTON KNOLLS UNIT NUMBER 3, BEING A SUBDIVISION OF PARTS OF SECTION 19, 20, 29 AND 30, TOWNSHIP 42 NORTH, RANGE 10 EAST OF THE THURD PRINCIPAL MERIDIAN ACCORDING TO THE PLAT THEREOF RECORDED JANUARY 23, 1970 AS DOCUMENT NUMBER 21065060 IN COOK COUNTY, ILLINOIS

02-30-213-004 STREET ADDRESS: 955 Patriot Lane Hoffman Estates, IL 60195

THAT said purchase price is \$ and/or that the loan is in the amount of \$ 300,000 . Deving a term of 30 years, an initial interest rate of 7.9 % per annum and an initial monthly paymer (crincipal and interest) of \$ 2510.10.

I HEREBY make, constitute and appoint my aforesaid attorney-in-fact to make, endorse, receive, sign, seal execute, acknowledge, acrest and deliver any and all deeds, deeds of trust, mortgages, notes, checks, receipts, releases, warranties, affidavits, cor trects, addends, settlement statements, loan commitments and disclosure documents, truth-in-lending stater ents. All forms of commercial paper, endorsements to checks, or the like, and any such other instrument or inst uments in writing of whatever kind, character and nature as may be necessary to complete the purchase and local cing and/or refinancing arrangements, and the settlement process for the aforementioned said premises

FURTHER, THIS POWER OF ATTORNEY shall terminate upon execution of the aforesaid transaction or at midnight on Q. 19 30 whichever occurs earlier.

NOTWITHSTANDING anything herein contained to the contrary, the Power of Attorney shall not terminate or be affected or impaired by my disability, it being my express out intion that this Power of Attorney shall

IN WITNESS WHEREOF, I have hereunto set my hand and seal this \_7 day of \_Jply . 2003 . COUNTY OF Cook

I HEREBY CERTIFY, THAT ON THIS 7 DAY OF July 2003 before me, the subscriber, a Notary Public in and for the jurisdiction aforesaid, personally appeared Cheryl A. Carlson 1 - ng well-known to me, or satisfactorily proven, to be the person who signed the foregolog SPECIFIC POWER OF ATTORNEY, and acknowledged that he/she executed the foregoing SPECIFIC POWER OF ATTORNEY, and instact are and voluntary act and deed for the purposes therein contained.

My commission expires

OFFICIAL SEAL LUCIA HALE

y public, state of illinois COMMISSION EXPIRES: 11/08/04

AFFIX NOTARY SEAL HERE:

AFFIDAVIT TO BE EXECUTED BY THE ATTORNEY-IN-FACT AT SETTLEMENT.

As of this \_\_\_\_\_ day of \_\_\_\_\_\_, 2003, I have not received actual knowledge or actual notice of the revocation or termination of this PPECIFIC POWER OF ATTORNEY, by death, disability or otherwise, or

