

Eugene "Gene" Moore Fee: \$28.00 Cook County Recorder of Deeds Date: 08/04/2003 08:34 AM Pg: 1 of 3

8/37458-1

LF240-04

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 AUTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAT 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, INCAPACIOATED 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.

Ruey- Ying Farey of 739 Red Cak Drive, Bartlett, IL. 60103
as Grantor, do hereby make and grant a limited and specific power of attorney to Hung-Chun Fang TO ALL PERSONS, be it known. that I,

of 739 Red Oak Drive, Bartlett, 11. 60103

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)

REFINANCE ONLY

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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This product does not constitute the rendering of legal advice or services. This product is intended for informational use only and is not a substitute for legal advice. State laws vary, so consult an attorney on all legal matters. This product was not necessarily prepared by a person licensed to practice law in your state.

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Special durable provisions:

Other terms

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. Refinance With 3 page right of Recession

Signed under sea this 27th day of Jun	18
Signed under sea this day of Signed in the presence of:	, 2003 (year).
Signed in the presence of:	
	Kusy- J. F. KUEY.
Witness	Grantor Hung-chun
Witness	Attorney-in-Fact
Witness	
Witness	
State of ULINOIS County of COOK	
County of Cook }	OUDX
On June 27, 2003 before me,	4
appeared = 440	· //x,
personally known to me (or proved to me on the ba	asis of satisfactory evidence) to be the person(s)
whose name(s) is/are subscribed to the within instr	ument and acknowledged to me that he/she/they
executed the same in his/her/their authorized capac	ity(ies), and that by pis/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.	4
Signature Hory 4le Fry	'\scripts'
Signature 41- pa	- Knowp Produced ID
0	OFFICIAL SEAL OF ID OR COLORS
,	HURNG YALE FANG
	ARY PUBLIC, STATE OF ILLINOIS { (Seal) OMMISSION EXPIRES 12-30-2006}
County of	**************************************
On before me,	
appeared	,
personally known to me (or proved to me on the ba	sis of satisfactory evidence) to be the person(s)
whose name(s) is/are subscribed to the within instru	iment and acknowledged to me that he/she/they
executed the same in his/her/their authorized canac	ity(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.	which the person(s) acted, executed the histrament.
Signature	
	Affiant Known Produced ID
	Type of ID
	(Seal)

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CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1409 008137658 VH STREET ADDRESS: 739 RED OAK DRIVE

CITY: BARTLETT COUNTY: COOK

TAX NUMBER: 07-27-306-011-0000

LEGAL DESCRIPTION:

ON COUNTY CLERK'S OFFICE LOT 81 IN WALNUT HILLS UNIT NUMBER 3, BEING A SUBDIVISION OF PART OF THE WEST 1/2 OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 9 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, IN THE VILLAGE OF BARTLETT COOK COUNTY, ILLINOIS.

LEGALD

SLV

07/02/03