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Doc#: 0327232050

Eugene "Gene" Moore Fee: \$30.00 Cook County Recorder of Deeds Date: 09/29/2003 08:57 AM Pg: 1 of 4

WHEN RECORDED MAIL TO:

The above space for recorder's use only

SPECIAL OR LIMITED DURABLE POWER OF ATTORNEY

			F. O.	
KNOW ALL ME	N BY THESE	PRESENTS, that I	Robert John Lukaszewicz Ir.	of
Cook	(County), _	Illinois	(State), have made, constituted and appoint	ted
and by these presents of	do make, cons	titute 2nd appoint	Beth Marie ukaszewicz,	of
Cople	(County),	III Com	(State), my true and lawful agent and	
attorney-in-fact (hereir	nafter referred	to as "attorney"), for	or me and in my name, place and stead to make,	
			name such notes, agreements, promises to pay, conveyance, mortgage (including without limitation	
deeds of trust) or lease	e, and any and	all other instrument.	is agreements and documents as my said attorney may	y
deem appropriate and	that are in any	way related to any t	transaction involving the ownership, maintenance,	
U / 1	d/or sale of, o	r any matter in any v	way related to, the following described property (the	
"Property"):	SEE I	EVUIRIT "A" EOR 1	LEGAL DESCRIPTION	
	31315	CATUDU A LUNI	LEGAL DISCIMITION	

My attorney shall have power to exercise such other powers as may be necessary or desirable in the management of the Property, whether the same be of like kind or character to hose herein enumerated or not, so long as related to the Property; in particular my said attorney is hereby enabled to act under changed conditions the exact nature of which cannot be foreseen, it being intended to vest in my said attorney, and I do hereby vest in my said attorney, full power to control and manage the Property and hereby giving and granting to my said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in connection therewith as fully to all intents and purposes, as I might or could do if personally present, hereby ratifying and confirming whatsoever my said attorney shall or tary do by virtue hereof.

All powers and authorities hereby granted may be exercised by my said attorney acting alone without the joinder of any other person.

This power of attorney shall not terminate on or be affected by the disability or incapacity of the principal. This power of attorney also shall not terminate or be affected by the lapse of time unless the loan contemplated hereunder is to be insured by the Federal Housing Administration.

The attorney named herein shall not be obligated to furnish bond or other security.

MAIL TO: RESIDENTIAL TITLE SERVICES 1910 S. HIGHLAND AVE. SUITE 202 LOMBARD, IL 60148

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Any authority granted to my attorney herein shall be limited so as to prevent this power of attorney from causing my attorney to be taxed on my income and from causing my estate to be subject to a general power of appointment by my attorney, as that term is defined in Section 2041 of the Internal Revenue Code.

I hereby ratify and confirm all that my attorney, of his successors, shall lawfully do or cause to be done by virtue of the power of attorney and the rights and powers granted herein.

I hereby bind myself to indemnify my attorney herein named and any successors who shall so act against any and all claims, liabilities, demands, losses, damages, actions and causes of action, including expenses, costs and reasonable attorneys' fees which my attorney at any time may sustain or incur in connection with his/her carrying out the authority granted him/her in this power of attorney.

This power of attorney and the powers herein granted shall terminate upon the earliest occurrence of (i) my death, (ii) revocation by an instrument in writing, duly executed and acknowledged by me and recorded or filed for record or filed for record in the office of the County Clerk or Recorder of the County and State in which the Property is located, co(iii) in the event the loan contemplated hereunder is to be insured by the Federal Housing Administration, the expiration of a period of time ending September (§ 2003). It is my intention that any person or any firm, corporation, joint venture, association or other legal entity of any kind or character dealing with my said attorney, or his/her substitute or substitutes, shall be entitled to rely on the provisions of this paragraph in determining whether or not this power of attorney has been revoked, and I hereby represent to those dealing with my said attorney or his/her substitute or substitutes, that they are entitled to rely upon the terms and provisions of this paragraph in determining whether this power of attorney has been revoked.

terms and provisions of this paragraph in distriming	monior mis power of autorney has coon revoked.
IN WITNESS WHEREOF, I have hereunto set my	hand this 6th day of September, 2002.
C	Roleb 2 11
	Signature
_	Robert-Jan Lukaszewicz Jr. Printed Name
STATE OF elleron }	O/Z
COUNTY OF Cook	15
personally appeared house is subscribed to the foregoing instruction the same for the purposes and consideration therein exp	ressed.
GIVEN UNDER MY HAND AND SEAL OF OFF	FICE this the St. day of September, 2002.
$\overline{ m Ne}$	Celeste Elaine Will otary Public in d for the State of Illinois
My Commission Expires: $\frac{2/15/0.7}{}$	
2 (OF 4

"OFFICIAL SEAL"
Celeste Elaine Hill
Notary Public, State of Illinois
My Commission Expires Feb. 15, 2007

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The undersigned witness certified	es that Robert Lukaszewicz J	<u>.</u>
ppeared before me and the Notary	whose name is subscribed as principal to the Public and acknowledged signing and deliver or the uses and purposes therein set forth. I	ing the instrument as the free
IN WITNESS WHEREOF, I ha	ve hereunto set my hand this 8^{11} day of	September, 20023
	_hmaru	SWS
STATE OF <u>ellinos</u>	KIMBERLY	A RUSKUSKY Printed Name
STATE OF Allinois		. Timed ivalie
COUNTY OF COOK		
BEFORE ME, the undersigned personally appeared person whose name is subscribed to the same for the purposes and consi	authority a Notary Public in and for said Co firm to A Rushusky the foregrap instrument, and acknowledged deration therein expressed.	ounty and State, on this day _, known to me to be that Tto me that executed
	ND SEAL OF OFFICE this the g	ay of Sentember 2002. 2
	Celesti Ela	•
	Notary Public in and for the State of	ling
My Commission Expires:		OFFICIAL SEAL" Celeste Elaine Hill tary Public, State of Illinois Commission, Expires Feb. 15, 2007
This Document was prepared by:	ROBERT JOHN LUKASZEWICZ JR. 432 SOUTH KENSINGTON AVENUE LA GRANGE, IL 60525	(C)
After recording please mail to:	Residential Title Services, Inc. 1910 South Highland Avenue, Suite 202 Lombard, Illinois 60148	

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EXHIBIT "A"

THE SOUTH 44 FEET OF LOT 8 AND THE NORTH 41 FEET OF LOT 9 IN BLOCK 16 IN LAY AND LYMAN SUBDIVISION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 4, TOWNSHIP 38 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL ID NUMBER: 18-04-326-018-0000

NOWN A. COUNTY CLORATS OFFICE COMMONLY KNOWN AS: 432 SOUTH KENSINGTON AVENUE