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RECORDING REQUESTED BY: PAUL & CATHERINE ABRAHAMSEN

Mail Recorded Document To:
Paul & Catherine Abrahamson
112 W. Garden Avenue
Palatine, Illinois 60067



Doc#: 0435504015
Eugene "Gene" Moore Fee: \$46.00
Cook County Recorder of Deeds
Date: 12/20/2004 09:59 AM Pg: 1 of 2

POWER OF ATTORNEY - SPECIAL AND LIMITED

KNOW ALL MEN BY THESE PRESENTS that I, CATHERINE E. ABRAHAMSEN, do hereby constitute and appoint PAUL C. ABRAHAMSEN as my true and lawful Attorney-in-fact for me and in my name, place and stead, to make, execute, accept and deliver any contract, paper and document in regard to the purchase/financing of the below described property:

04-008333

LOT 58 IN "ENGLISH VALLEY" UNIT ONE, BEING A SUBDIVISION OF PART OF THE EAST 1/2 OF THE NORTHEAST 1/4 OF SECTION 10, TOWNSHIP 42 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY, ILLINOIS, N JULY 10, 1969, AS DOCUMENT NUMBER 2460775, IN COOK COUNTY, ILLINOIS.

(Commonly known as 112 W. Garden Avenue, Palatine, Illinois 60067)

It is affirmed that the above described property will be used as my primary residence, or that of my immediate family in my absence.

I HEREBY make, constitute and appoint my aforesaid attorney-in-fact to make, receive, sign, seal, execute, acknowledge, accept and deliver any and all deeds, deeds of trust, mortgages, notes, checks, receipts, releases, warranties, affidavits, contracts, addenda, settlement statements, loan commitments and disclosure documents, truth-in-lending statements, all forms of commercial paper, endorsements to checks, or the like, and any such other instruments or instruments in writing of whatever kind, character and nature as may be necessary to complete the purchase, financing arrangements, and the settlement process for the aforementioned property.

FURTHER, THIS POWER OF ATTORNEY shall terminate upon execution of the aforesaid transaction or expire at midnight on December 15, 2004.

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

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intention that this Power of Attorney shall survive my disability.

Catherine E. Abrahamson
CATHERINE E. ABRAHAMSEN

Dated: 11/20, 2004

STATE OF ILLINOIS)
) SS.
COUNTY OF COOK)

ON 11-29-04, 2004 before me, CATHERINE E. ABRAHAMSEN personally appeared who is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the foregoing Special and Limited Power of Attorney and acknowledged to me that she executed the same in her authorized capacity as her free and voluntary act, and that by her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Dated: 11-29-04, 2004



Signature *[Handwritten Signature]*

(Notary Seal/Expiration Date)

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[Handwritten Initials]