

Doc#: 0506733051
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 03/08/2005 09:01 AM Pg: 1 of 2

SPECIFIC POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, GLORIA GENTILE, of Cook County, State of Illinois, have made, constituted and appointed, and do by these presents make, constitute and appoint

RICHARD M. GENTILE

as ATTORNEY-IN-FACT, for me and in my name, place and stead, for the purpose of signing any and all deeds, contracts, closing documents, assignments, FHA forms, VA forms, closing statement, RESPA Statement and other documents incidental and relating to the refinance of the property known as:

SPACE FOR RECORDER'S USE ONLY

LM 8805241/25014323

Lot 15 in Block 4 in Arcadia Gardens, a Subdivision in the East 15 acres of the West Half of Government Lot 1 in the Northwest Quarter of Section 2, Township 40 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois.

Tax Index No.: 12-02-123-019

Property Address: 1220 W. Peterson, Park Ridge, Illinois 60068

I FURTHER HEREBY make, constitute and appoint my aforesaid attorney-in-fact to sign, seal and acknowledge and deliver the same, and do all such acts, matters and things in relation to my interests in said property located in Illinois, as I might or could do if acting personally.

FURTHER, THIS POWER OF ATTORNEY shall remain in full force and effect until revoked, suspended or terminated by a document executed and acknowledged by me and recorded among the Land Records for Cook County, State of Illinois. This Power of Attorney shall be binding on me, my heirs, successors, assigns, executors, administrators and personal representatives, and any person receiving this Power of Attorney shall be entitled to rely on the authority herein given until and unless a document expressly revoking the powers herein given is recorded among the aforesaid Land Records.

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 intention that this Power of Attorney shall survive my disability.

WITNESS the following signature and seal this 22 nd day of February, 2005.

Gloria Gentile
Gloria Gentile

2/9

NOV 2005


UNOFFICIAL COPY

STATE OF ILLINOIS)
) SS:
COUNTY OF)

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that GLORIA GENTILE, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me and the additional witness this day in person, and acknowledged that she signed, sealed and delivered the said instrument as her free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and official seal, this 23 day of February, 2005.

Commission expires 



Notary Public

The undersigned witness certified that Gloria Gentile, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory.

Date: _____ (Seal) _____
Witness

This instrument was prepared by:
LEE POTERACKI
Nudo, Poteracki & Assoc., P. C.
1700 Higgins Road
Suite 650
Des Plaines, Illinois 60018

MAIL TO: