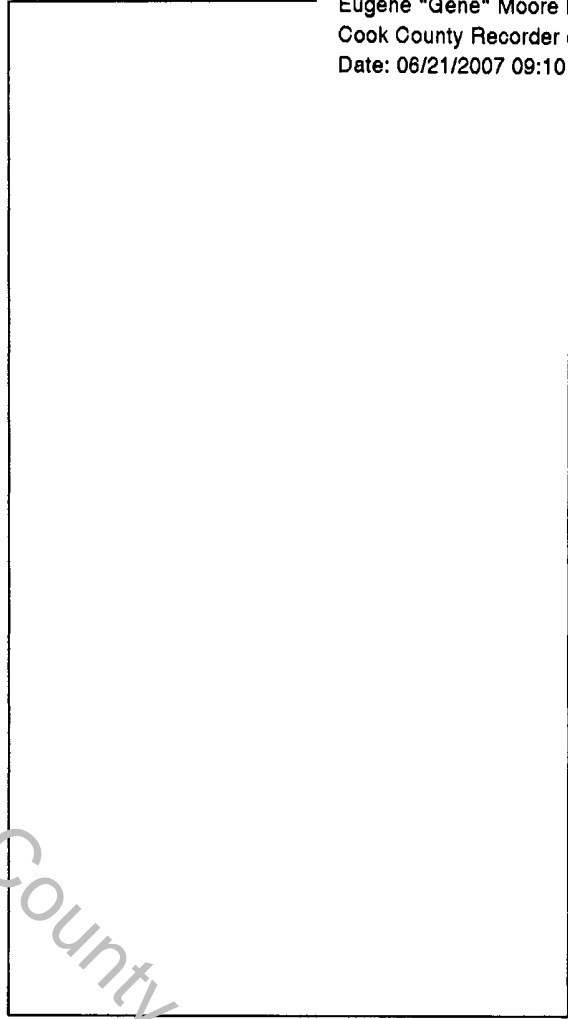


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Doc#: 0717241001 Fee: \$34.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 06/21/2007 09:10 AM Pg: 1 of 6



Property of Cook County Clerk's Office

JNW61039121
2702/11/180
2004

**POWER OF ATTORNEY FOR
PROPERTY**

POWER OF ATTORNEY made this 1st day of June, 2007 *bc*

BOX 333-CP

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1. I, RACHEL HAMMEL, of 6 Cedar Branch Drive, Little Rock, Arkansas 72223, appoint my attorney, EUGENE CHARLES JIONGCO, of 303 W. Madison Street, 23rd Floor, Chicago, Illinois, 60606 as my Attorney-In-Fact (my "agent") to act for me and in my name (in any way I could act in person) with respect to the following powers, as defined in Section 3-4 of the "Statutory Short Form Power of Attorney for Property Law" (including all amendments), but subject to any limitations on or additions to the specified powers inserted in Paragraph 2 or 3 below:

(You must strike out any one or more of the following categories of powers you do not want your agent to have. Failure to strike the title of any category will cause the powers described in that category to be granted to the agent. To strike out a category you must draw a line through the title of that category.)

- (a) Real estate transactions, including the waiver of any and all homestead rights that the Principal may have in the property.
- (b) Financial institution transactions.

(Limitations on and additions to the agent's powers may be included in this power of attorney if they are specifically described below.)

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars (here you may include any specific limitations you deem appropriate, such as a prohibition or conditions on the sale of particular stock or real estate or special rules on borrowing by the agent):

NONE

3. In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below):

Full power and authority to execute in my name and on my behalf any and all mortgage documents, promissory note(s), mortgages, including the waiver of homestead, HUD-1/RESPA forms, vendor and purchaser affidavits, escrow forms, ALTA statements, and any and all other documents necessary or required by Bank of America, or any other lender as well as any title insurance company respecting or relating to the acquisition, financing, purchase or mortgage of the property commonly known as 3649 Davis Street, Skokie, Illinois 60076.

(Your agent will have authority to employ other persons as necessary to enable the agent to properly exercise the powers granted in this form, but your agent will have to make all discretionary decisions. If you want to give your agent the right to delegate discretionary

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decision making powers to others, you should keep the next sentence, otherwise it should be struck out.)

This Power of Attorney shall not be affected by the disability of the principal.

4. My agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision making to any person or persons whom my agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.

(Your agent will be entitled to reimbursement for all reasonable expenses incurred in acting under this Power of Attorney. Strike out the next sentence if you do not want your agent to also be entitled to reasonable compensation for services as agent.)

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(This Power of Attorney may be amended or revoked by you at any time and in any manner. Absent amendment or revocation, the authority granted in this Power of Attorney will become effective at the time this Power is signed and will continue until your death unless a limitation on the beginning date or duration is made by initialing and completing either (or both) of the following:)

6. ~~(PDA)~~ This power of attorney shall become effective on June 10, 2007.

(insert a future date, or event during your lifetime, such as court determination of your disability, when you want this power to first take effect.)

7. ~~(PDA)~~ This Power of Attorney shall terminate on June 24, 2007.

(insert a future date or event such as court determination of your disability, when you want this power to terminate prior to your death.)

(If you wish to name successor agents, insert the name(s) and address(es) of such successor(s) in the following paragraph.)

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8. If any agent named by me shall die, become legally disabled, resign or refuse to act, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

NONE

(If you wish to name a guardian of your person or a guardian of your estate, or both, in the event a court decides that one should be appointed, you may but are not required to do so by inserting the name(s) of such guardian(s) in the following paragraphs. The court will appoint the person nominated by you if the court finds that such appointment will serve your best interests and welfare. You may, but are not required to, nominate as your guardian(s) the same person named in this form as your agent.)

9. If a guardian of my person is to be appointed, I nominate the following to serve as such guardian:

NONE

(insert name and address of nominated guardian of the person)

10. If a guardian of my estate (my property) is to be appointed, I nominate the following to serve as such guardian:

NONE

(insert name and address of nominated guardian of the person)

11. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my agent.

Signed 
RACHEL HAMMEL

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I believe him or her [the principal under the power of attorney] to be of sound mind and memory.

X [Signature] Residing at 6 Cedar Branch Dr. Little Rock, AR
(witness) 72223

(You may, but are not required to, request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this Power of Attorney, you must complete the certification opposite the signatures of the agents.)

() NOT REQUIRED

Specimen signatures of agent (and successors)

I certify that the signatures of my agent (and successors) are correct.

(agent)

(principal)

(successor agent)

(principal)

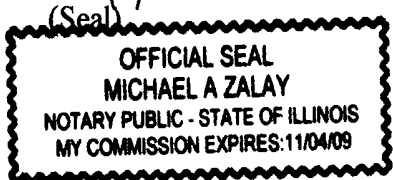
(successor agent)

(principal)

(This Power of Attorney will not be effective unless it is notarized, using the form below.) The undersigned, a notary public in and for the above state and county, certifies that RACHEL HAMMEL and the above Witness, known to me to be the same person whose name is subscribed as principal to the foregoing Power of Attorney, appeared before me in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth.

DATED: 6/1/07

[Signature]
Notary Public
My Commission Expires 11/4/09



This document was prepared by:
Berger, Newmark & Fenchel P.C.
303 W. Madison Street
23rd Floor
Chicago, Illinois 60606
312-704-7241 (o)

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CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1409 NW6103917 SK
STREET ADDRESS: 3649 DAVIS STREET
CITY: SKOKIE COUNTY: COOK
TAX NUMBER: 10-14-303-073-0000

LEGAL DESCRIPTION:

LOT 18 (EXCEPT THE EAST 5.5 FEET THEREOF) ALL OF LOT 19 AND THE EAST 11.5 FEET OF LOT 20 IN BLOCK 2 IN BARTLETT'S ADDITION TO EVANSTON, BEING A SUBDIVISION OF THE NORTH 1/2 OF THE SOUTH 1/2 OF THE NORTHEAST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 14, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, TOGETHER WITH THE NORTH 1/2 OF THE VACATED 16 FOOT PUBLIC ALLEY ADJOINING SAID LOTS, IN COOK COUNTY, ILLINOIS.

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