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STEWART TITLE OF ILLINOIS
2 N LASALLE #625
CHICAGO, ILLINOIS 60602
312-849-4243
FILE # _____

Doc#: 0725440106 Fee: \$30.00
Eugene "Gene" Moore RHSP Fee:\$10.00
Cook County Recorder of Deeds
Date: 09/11/2007 11:26 AM Pg: 1 of 4

POWER OF ATTORNEY

LEGAL DESCRIPTION

LOT 30 IN BOYD AND HALL'S SUBDIVISION OF BLOCK 2 IN CIRCUIT COURT PARTITION OF THE EAST 1/2 OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 25, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Commonly known as: 7515 South Crandon

Chicago IL 60649

PIN/Tax Code:

20-25-406-012-0000

4 CB

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General Power of Attorney (with Durable Provision)

STC 538173
Tot 2

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD 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, INCAPACITATED 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.

TO ALL PERSONS, be it known that I, Nafees Razaq
of 4815 S. Indiana, Chicago, Illinois 60649
the undersigned Grantor (hereinafter Principal), do hereby make and grant a general power of attorney to
Carmen McWillis-McGhee of 4815 S. Indiana, Chgo, Il.
and do thereupon constitute and appoint said individual as my Attorney-in-Fact/Agent. 60615

If my Agent is unable to serve for any reason, I designate Karimah Razaq
of 4815 S. Indiana, as my successor Agent.

My Attorney-in-Fact/Agent shall act in my name, place and stead in any way that I myself could do, if I were personally present, with respect to the following matters, to the extent that I am permitted by law to act through an agent:

(NOTICE: The Principal must write his or her initials in the corresponding blank space of each box below with respect to each of the subdivisions (A) through (N) below for which the Principal wants to give the agent authority. If the blank space within a box for any particular subdivision is NOT initialed, NO AUTHORITY WILL BE GRANTED for matters that are included in that subdivision. Cross out each power withheld.)

- (A) Real estate transactions
- (B) Tangible personal property transactions
- (C) Bond, share and commodity transactions
- (D) Banking transactions
- (E) Business operating transactions
- (F) Insurance transactions
- (G) Gifts to charities and individuals other than Attorney-in-Fact/Agent
(If trust distributions are involved or tax consequences are anticipated, consult an attorney.)
- (H) Claims and litigation
- (I) Personal relationships and affairs
- (J) Benefits from military service

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- [WR] (K) Records, reports and statements
- [] (L) Full and unqualified authority to my Attorney-in-Fact/Agent to delegate any or all of the foregoing powers to any person or persons whom my Attorney-in-Fact/Agent shall select
- [] (M) Access to safe deposit box(es)
- [WR] (N) All other matters

Durable Provision:

[WR] (O) If the blank space in the block to the left is initialed by the Principal, this power of attorney shall not be affected by the subsequent disability or incompetence of the Principal.

Other Terms: _____

My Attorney-in-Fact/Agent hereby accepts this appointment subject to its terms and agrees to act and perform in said fiduciary capacity consistent with my best interests as he or she in his or her best discretion deems advisable, and I affirm and ratify all acts so undertaken.

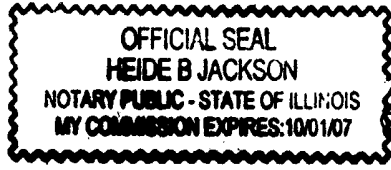
TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Signed under seal this 1st day of April, 20 05.

Signed in the presence of:

 Witness 4/1/05 Grantor (Principal) Nafess Razavi

 Witness Attorney-in-Fact/Agent



[Handwritten Signature]

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AFFIDAVIT

I, Carmen McWillis McGhee, being first duly sworn under oath, states as follows:

1. Nafees Abdul Razaag executed a General Power of Attorney on April 1, 2005 naming the undersigned as Attorney-in-Fact/Agent.
2. Said Power of Attorney has not been revoked is still in full force and effect as of August 15, 2007.

FURTHER AFFIANT SAYETH NAUGHT.


 CARMEN MCWILLIS MCGHEE

Dated this 21 day of August, 2007

STATE OF ILLINOIS)
) SS
 COUNTY OF COOK)

I, the undersigned, a **NOTARY PUBLIC** in and for said County, in the State aforesaid, do hereby certify that **CARMEN MCWILLIS MCGHEE**, whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they sealed and delivered the said instrument as his free and voluntary act, for the uses and purposes therein set forth.

GIVEN UNDER MY HAND AND NOTARIAL SEAL, this 21 day of August, 2007.





 NOTARY PUBLIC

My commission expires _____

IMPRESS SEAL HERE: