

LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS;

	cis Yip	01	Chicago		county
ol Cook		ind State of	Illinois		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
has made and appoint Crowley, or Diane M.				i and appoint P	ameia J.
of Household Bank, f.s				State of Illinois	s my true
and lawful autorney for					•
Execute any and all do	ocuments for the c	ourpose of assign	ning and transfer	ino a certain m	ortnane
deed of trust, security					
deed of trust, or secur	ity instrument and	note allonge for	the following loa	n transaction:	
Borrower(s) Names:	Peter Spryro	poulos. KKK	ka Spyropoul	los	
Address of Property:	6710 N. Karl	ov Efi	е .		
City, State, Zip Code:	Lincolnwood,	IL 60645	1 E.S.		
HMS Loan Number:	6479166				93
giving and granting unto	o my said attornev	Juli power and a	uthority to do and	d perform all ar	as fully, as fully, as fully, as fully, as fully, as fully, attorney
act and thing whatsoev	er, requisite and n	ecassary to be d	one in and about	the premises,	as fully, 😜
to all intents and purpo					of, with
full power of substitution shall lawfully do or cau			and comming a	ii that my saio a	attorney
		40	✓		
IL: TOOTHAOAN IANE	DEAE I have b		2	461- 204h	alan, ad
IN TESTIMONY WHE April 19		ereto set my d	and and sear	this <u>20th</u>	day of
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	<u>. </u>	pour in	. (12)		497.0
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State of: Illineis			, \$765 CB	11 \$ %92 IOK COUNTY NEC	5-423921
County of: Cot K			, ,	on Codial Life) ONDEN
1. SEE Y. WONG	_		المائد من المنصوب المائد الماسا	1==1= Mar ==1# <i>f</i>	3 .
in the State aforesaid, do	· · · · · · · · · · · · · · · · · · ·		and for, and residi		
name is subscribed to					
acknowledged that _he_			said instrument a	s a free and vo	luntary
act for the uses and pur	poses therin set to	onn.			*• •
GIVEN under my hand a	and notarial seal th	ne is <u>20th</u> da	y ofApri	1, 19_93	
•					
					7.7 69
	C	. 1			
	<u> ee</u> ') W		EIGIAL CE	••••••
	Nota	ry Public	}	EE Y. WON	GAL " }
200 (AB3		\bigcap	YRATON {	PUBLIC, STATE OF	ILLINOIS }
		1.1 _ () - (SMT COMI	MISSION EXPIRES	2/10/99 > ~ 6

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