94065284

DURABLE POWER OF ATTORNEY of LILLIE MAE PRITCHETT to NATHANIEL J. COLEMAN

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NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY WHICH MAT INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OF PERSONAL PROPERTY WITHOUT ADVANCE MOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS: BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUF CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT. YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECCHE DISABLED. POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTOPROY FOR PROPERTY LAW", OF WHICH THIS FORM IS A PART. THAT LAW EXFRENSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT DESIRE. UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.) POWER OF ATTORNEY MADE THIS 14TH DAY OF JANUARY, 1994.

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1. I, LILLIE MAE PRITCHETT of 9601 S. Greenwood Ave., Chicago, Cook County, Illinois 60628, hereby appoint NATHANIEL J. COLEMAN, 9601 S. Greenwood, Ave., Chicago, Illinois 60616, as my attorney in fact (my "agent") to act for me and in my name and (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 FOLICHING 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 1 LINE THROUGH THE TITLE OF THAT CATEGORY.

- (a) Real estate transactions
- (b) Financial institution transactions
- (c) Stock and Bond transactions
- (d) Tangible personal property transactions
- (e) Safe deposit box transactions
- (f) Insurance and annuity transactions
- (g) Retirement plan transaction
- (h) Social Security, employment and military service benefits
- (i) Tax matters
- (j) Claims and litigation
- (k) Commodity and Options transactions
- (1) Business operations
- (m) Borrowing transactions
- (n) Estate transactions
- (o) All other property powers and transactions
- (p) Bank Account transactions

#### WITHOUT LIMITATIONS ON ABOVE POWERS; SPECIFICALLY INCLUDED, ARE:

- (1) Bank accounts: checking # 13003066 and Savings # 01-1348893 at Advance Bank FSB-2320 Thornton Rd., Lansing, Il. 60438.
- (2) Real Estate at 7743 S. Wood St., Chicago, Cook County, Illinois: legally described as; Lot 26 in Block 22 in Englefield, being a Subdivision in the South East Quarter of Section 30, Township 36 North, Range 14, East of the Third Principal Meridian in Cook County, Illinois. P.I.N # 20-30-424-015
- (3) 901 Avenue L, McComb, Pike Codunty, Mississippi. legally described as:

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All W 1/2 SQ 399 less 200' E & W X 250' N & S in NW COR 10 Acres More or less & 129' E & W 250' N & S in NE COR W 1/2 SQ 399 NSDE MCCOMB

77 E Side SQ 397 All W 1/2 SQ 398 less 50' E & W 100' N & S in SW COR SQ 39' & 398 NSD E MCCOMB

(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:

none

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO EMBLE 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 DELIGATE DISCRETIONARY DECISION MAKING POWERS TO OTHERS YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWISK IT SHOULD BE STRUCK OUT.)

3. My agent shall have discretionary powers to employ others and to designate discretionary decisions.

(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.)

4. My agent shall be entitled to reasonable compensation for

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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.)

- 5. (x) this power of attorney shall become effective on: ON THE DATE OF ITS EXECUTION. 14th Day of January, 1994.
- 7. This power of autorney shall terminate on: no termination date.

(IF YOU WISH TO NAME AUCCESSOR AGENTS, INSERT THE NAMES(5) AND ADDRESSES OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, 1 name the following (each to act alone and successively, in the order named.) as successor(s) to such agent. None named.

for purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor of an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

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(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO DO SO, BY RETAINING THE FOLLOWING PARIGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT THE PARAGRAPH IF YOU DO NOT WANT YOUR AGENT TO LCT AS GUARDIAN.)

9. If a guardien of my estate (my property) or my person is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

(YOU MAY, BUT ARE NOT REQUIRED TO PEQUEST YOUR **AGENTS** TO **PROVIDE** SUCCESSOR AGENT AND YOU TACLUDE SPECIFIED SIGNATURES BELOW. IF POWER OF THIS SPECIFIED SIGNATURES IN ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)

not required or requested

#### PERSONAL INFORMATION

Lillie Mae Pritchett- Social Security Number: 428-34-7555

Nathaniel J. Coleman- Social Security Number: 426-82-8141

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(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED, USING THE FORM BELOW.)

10. I am fully informed as to all the contents of this form and understand the full impact of this grant to my agent.

Dillie Mae Pritchett

Witness to signature of Lillie Mae Pritchett:

Address of Witness

Chicago, Il.

STATE OF ILLINOIS

COUNTY OF COOK

The undersigned, a notary public in and for the above county and State certifies that Lillium Mae Pritchett 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.

Date: January 14, 1994- At Chicago, Copk, County, Ill Digis.

Notary Public

(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE)

This document was prepared by:

Michael Anthony Lowe, Attorney at law 445 East 87th Street Chicago, Illinois 60618 (312) 783-5597 \$3082284