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SPECIFIC POWER OF	ATTORNEY	• •••	95439830) .
	1	re .		•
KNOW ALL MEN BY That I SHANDRA M. FIL	VDLEY, of 810 Gr	ev.		
Businston, Illinois, County	of Cook and State	OI .		***
Illinois, have made, constand do by these presents	make, constitute i	and		9 4
ennoint JERRY L. FINI	OLEY. of Evanst	on.		40
illinois, as ATTORNEY-in my name, place and ste	ad, for the purpose	ing of	•	in it
elening any and all Deed	s, affidavits, Notel	(8).		-
Dead(s) of Trust, Mostatements, HUD Forms	ongages, setuem . VA Forms. Fi	eni IA	DEPT-01 RECORD	ING ** *23.00 052 07/07/95/09:51:00
Forms, and any and a incidental and relating to	il other docume	pts ,	• \$2582 \$ JM	*~95~439830
financing of the property	no purchase and	or	 COOK COUNTY 	RECORDER
Titural and back and				
<u>(</u>	C) /-49	/J	<u>.</u> -	
	CVX			
C LOT \$3 AND THE WES	T 1/2 UF 777 5	4 IN SLOCK 4 IN J	. S. HOLLAND EVANS	NOT PIOT
D SUBDIVISION OF THE	SOUTH BAST	4 of the horthies	r 1/4 of exciton 1	3, TOWNSHIP 41 NO
MORTH, RANGE 13 BA	ET OF THE THE	PRINCIPAL MERID	IVR' IN COOK COURT	x, intinois.
	ah Garage Prisman	- W X0001		P.I.N. 10-13-116-070
Also known as: 2125 Chur				` · · · · · · · · · · · · · · · · · · ·
I PURTHER HEREBY m	ike, constitute and	appoint my aforesaid a	morney-in-fact to sign, s	eal, and acknowledge an
deliver the same, and do al said property located in Ev	i such acis, matter ansion. County of	Cook and Slate of Nil	nois, as I might or could	do if acting personally,
• •	·. I			_
FURTHER, THIS POWER by a document executed an	d acimowledged by	rme and recorded almo	he Land Records for Co	uniy of Cook and State c
Illimate This Dawer of At	tornav chall ha bin	ritrar on me. mv neimi.	GULCHROIS, ANNIEUS, GAR	
personal representatives, an given unless a document ex	oressiv revoking th	ving this Power of Attor ving this Power of Attor	is recorded among the La	and Records. This Specifi
Power of Attorney shall ter	minate on July 26	, 1995,		, •
NOTWITHSTANDING an	vihing herein cont	ained to the contrary.	this Power of Attorney	shell not terminate or b
affected or impaired by m	y disability, it be	ng my express intenti	on that this Power of A	attorney shall survive me
disability.		with 1		,
WITNESS the following sign	gnature and seal th	is 26 day of	<u>. </u>	·6 -
•	.		0, 00 (1)	0.
•		_	Shords Short	malife & SEAT
A		>	AHANDRA M. FINDL	BY
STATE OF Ne Vada } SS	,	· ·		
COUNTY OF LACY			1964	()
I, the undersigned Notary P		- Causes and Same akan		n evenirar on the OTA
i, the undersigned Notary P	uone, in and for the	e County and State around that SHANDRA M. FI	NDLEY, whose name i	s signed to the foregoin
Specific Power of Attorney	has acknowledge	i the same before me is	my jurisdiction alogees	id.
GIVEN under my hand this	27day or	June 195	5. A// M/A/	THE COMMENT
MELISSA MAI	RTIN		IMA II LAGA	(SEAI
NOTARY PUBLIC N		& BLAIR, P.O., 750 LAKE C	OOK: AIGEBURERLYN	WELL II SOORS .
		A MIDINE OF C. 14D LAKE C.		ACCUSATION IN MANAGEMENT

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Doenty Of County County

Prepared. by: Horn SAVINSS

P.O. BOX 60015

City of Industry, CA

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