INOFFICIAL COPY

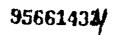
WHEN RECORDED RETURN ORIGINAL TO:

Chase Manhattan Mortgage Corporation 4915 Independence Parkway Tampa, FL 33634-7540

Attention: Post Production Services

5/43574/Detroins

SIS-A DIVISION OF INTERCHANT



DEPT-01 RECORDING

\$23.50

T40001 TRAN 9930 09/29/95 09:29<u>:</u>00

4772 t JM +-95-661434

COOK COUNTY RECORDER

(Space Abo

or Recording Date)

LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PYESENTS:

CHICAGOLAND HORE MURTGAGE CORPORATION That

(the "Principal"), with its principal place of business at

4501 N. CUMBERLAND

NORRIDGE. IL 60656

and appoints Chase Manhattan Mortgage ,constitutes Corporation ("CMMC") and it's officers, its true and lawful accomey-in-fact; and in its name, place and stead and for its use and benefit, to execute any and all documents for the purpose of assigning and transferring to CMMC that certain mortgage, deed of trust, security instrument and note, which note was table funded by CMMC but closed in the Principal's name, including but not limited to, executing an assignment of mortgage, deed of trust, or security instrument and/or end or ing a promissory note and/or allonge for the following loan transaction:

LYLE J. VITACCA Borrower(s) Names:

PHYLLIS VITACCA

Address of Property: 1013 NORTH KNIGHT STREET City, State, & Zip Code: PARK RIDGE, IL 60068

Loan No.: 3645282 95661334

POA1

Page i of 2

03/31/95

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The undersigned gives to said attorneys in-fact full power and authority to encoure such instruments as if the maderniqued were personally present, hereby ratifying and confirming all that said attentiey-in-fact shall lawfully do or cause to be done by anthority hereof. IN WITNESS WHEREOF, this limited power of attorney has been executed this 2941 July (Space Below This Line Reserved For Acknowledgement)

STATE OF ILLINOIS COUNTY OF COOK

On this

before me personally appeared personally known to me or proved

-7674'S OFFICE

to me on the basis of satisfactory evidence to the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of mich the person acted, executed the within instrument.

WITNESS my band and official scal.

My Commission expires:

OFFICIAL SEAL SUZANNE STIEFEL Notary Public, State of fillnois My Commission Expires 09/04/96

95661434

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