

SPECIFIC POWER OF ATTORNEY
UNOFFICIAL COPY

95065563

KNOW ALL MEN BY THESE PRESENTS, That I, Sandra J. Ghandehari of Walworth County, State of Wisconsin, have made, constituted and appointed, and do by these presents make, constitute and appoint Reza Ghandehar ATTORNEY-IN-FACT, for me and in my name, place, and stead, for the purpose of signing any and all Deeds, affidavits, Note(s), Deed(s) of Trust, Mortgages, settlement statements, HUD Forms, VA Forms, FHA Forms, and any and all other documents incidental and relating to the purchase and/or financing of the property known as:

LOT 3 AND 4 IN BLOCK 2 IN J. S. HOWLAND'S EVANSTON SUBDIVISION OF THE SOUTH EAST 1/4 OF THE NORTHWEST 1/4 OF SECTION 13, TOWNSHIP 41 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

TAX # 10-13-118-007-0000

This instrument does not affect to whom the tax bill is to be mailed and therefore no Tax Billing Information Form is required to be recorded with this instrument.

also known as: 1932 Emerson, Evanston, IL 60201 DEPT-01 RECORDING \$23.00
T0012 TRAN 2030 01/27/95 12:52:00
#1931 + RB #--95-065563
COOK COUNTY RECORDER

I FURTHER HEREBY make, constitute and appoint my aforesaid attorney-in-fact to sign, seal, and acknowledge and deliver the same, and do all such acts, matters and things in relation to the purchase and/or financing of my interests in said property located in Cook County, IL, as I might or could do if acting personally.

FURTHER, THIS POWER OF ATTORNEY shall remain in full force and effect until revoked, suspended or terminated by a document executed and acknowledged by me and recorded among the Land Records for Cook County, State of Illinois. This Power of Attorney shall be binding on me, my heirs, successors, assigns, executors, administrators and personal representatives, and any person receiving this Power of Attorney shall be entitled to rely on the authority herein given until and unless a document expressly revoking the powers herein given is recorded among the aforesaid Land Records.

NOTWITHSTANDING anything herein contained to the contrary, this Power of Attorney shall not terminate or be affected or impaired by my disability, it being my express intention that this Power of Attorney shall survive my disability.

WITNESS the following signature and seal this 23rd day of January, 1995.

Sandra J. Ghandehari (SEAL)
SANDRA J. GHANDEHARI

STATE OF Wis.

COUNTY OF WALWORTH, to wit:

I, the undersigned Notary Public, in and for the County and State aforesaid, whose commission expires on the 23 day of January, 1995, do hereby certify that Sandra J. Ghandehari whose name is signed to the foregoing Specific Power of Attorney, has acknowledged the same before me in my jurisdiction aforesaid.

GIVEN under my hand this 23 day of January, 1995.

PREPARED BY AND MAIL TO:

JOLE HYMAN
750 W. LAKE COOK RD
BUFFALO GROVE IL 60089

Beth A. Pratt
NOTARY PUBLIC

SMU 359 Multistate 10/87

BOX 333-CTI

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