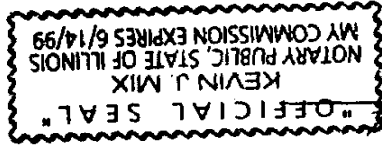


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Type of ID \_\_\_\_\_  
Produced ID \_\_\_\_\_  
(Seal)

Signature \_\_\_\_\_  
Affiant \_\_\_\_\_  
WITNESS my hand and official seal \_\_\_\_\_  
the instrument.

that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed (the same in his/her/their authorized capacity(ies), and appeared before me, \_\_\_\_\_  
County of Cook, Ill. 3/19/95  
State of Illinois

Witness \_\_\_\_\_  
Attorney-in-Fact \_\_\_\_\_

Witness \_\_\_\_\_  
Grantor \_\_\_\_\_  
Signed in the presence of: \_\_\_\_\_

Signed under seal this 31st day of October, 19 95. DEPT-10 PENALTY \$20.00

Handwritten signature and initials

Other terms:

This power of attorney shall not be affected by disability of the Grantor. This power of attorney may be revoked by the Grantor giving notice of revocation to the attorney-in-fact, provided that any party relying in good faith upon this power of attorney shall be protected unless and until said party has either a) actual or constructive notice of revocation, or b) upon recording of said revocation in the public records where the Grantor resides.  
I agree to reimburse my attorney-in-fact all reasonable costs and expenses incurred in the fulfillment of the duties and responsibilities enumerated herein.  
Special durable provisions:  
COOK COUNTY RECORDER  
DEPT-01 RECORDING  
TRAN 0800 01/03/96 09:57:00  
#1799 # JM \*-96-002752

My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interests as my attorney-in-fact deems advisable, and I thereupon ratify all acts so carried out.  
The authority granted shall include such incidental acts as are reasonably required or necessary to carry out and perform the specific authorities and duties stated or contemplated herein.

P.I.N. # 10-14-910-008  
Address of Premises: 9001 N. East Prairie, Skokie, IL, IL  
Address of Premises: 9001 N. East Prairie, Skokie, IL, IL  
41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally; all with full power of substitution and revocation in the presence: (Describe specific authority) to make, execute, acknowledge, and deliver all contracts, deeds, assignments, notes, trusts, deeds, mortgages, assignments, releases and waivers of homestead rights, affidavits, bills of sale, and other instruments and to endorse and negotiate checks and bills of exchange requisite or proper to effectuate the purchase of the premises described as follows:  
LOT 55 IN SWENSON BROTHERS FOURTH ADDITION TO COLLEGE HILL, BEING A SUBDIVISION IN THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 14, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

TO ALL PERSONS, be it known, that I, SHAMOUN EMMANUEL SHAMOUN of 618 N. SHERIDAN RD. CHICAGO ILL. 60660 as Grantor, do hereby make and grant a limited and specific power of attorney to EVELYN M.Y. SHAMOUN of 618 N. SHERIDAN RD. CHICAGO ILL. 60660 and appoint and constitute said individual as my attorney-in-fact.

36002752

(With Durable Provision)

LIMITED POWER OF ATTORNEY

Form A240

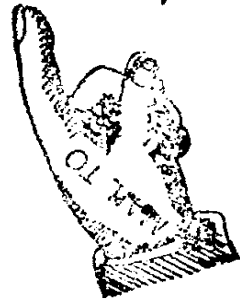
INTERCOUNTY TITLE  
8145852 INC (2)

UNOFFICIAL COPY

98062752

#800  
168 N. Michigan  
Chgo Ill 60601  
Kevin Mix

Property



Property of Cook County Clerk's

E-2 Legal Form A240

LIMITED POWER  
OF ATTORNEY

DATED: