97022335



DEPT-01 RECORDING \$23.50

. T#0011 TRAN 5082 01/10/97 13:41:00

+0806 + KP #-97-022335 COOK COUNTY RECORDER

DEPT-10 PENALTY

\$20.00

POWER OF ATTORNEY made this 6th day of January, 1997.

Loayza, as my attorney-in-fact (my "agent") to act for me and in my name (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:

- (a) Real estate transactions.
- 2. The powers granted above shall not include the following powers or shall be wodified or limited in the following particulars: None
- 3. In addition to the powers granted above, I grant my agent the following powers: To do any lawful act, including the execution of documents, regarding the sale of the property located at 4521 Woodland Avenue, Western Springs, Illinois.

 Lot 15 in block 6 in Western Springs resubdivision of part of East Hinsdale. In the East 1/2 and the East 1/2 of the Southeast 1/4, North of railroad, of section 6. Township 38 North. Range 12. East of the third principal meridan. In Cook County, Illinois. Parcel number: 18064160060000
- 4. My agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision-making to any person or persons whom my agent may select, but such delegation may be amended or removed by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.
- 5. My agent shall be entitled to reasonable compensation for services rendered as agent under this Power of Attorney.
- 6. This Power of Attorney shall become effective on January 6th, 1997
 - This Power of Attorney shall terminate on June 1, 1997.

ATTERMENT PATIONAL TRACE METAGES
THREE PROUT HONORAL FLACA
CUTTE 575

CHICAGO, IL 60602

COGO BOLOR

Property of Coot County Clark's Office

I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my agent. Signed A certify that signatures of my agent (and successors) are correct. (principal) (principal) (successor agent) (principal) (successor agent) STATE OF COUNTY OF The undersigned, a notary public in and for the above county and state, certifies that La Verne P. Loayza, 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, and certified to the correctress of the signature(s) of the agent(s). OFFICIAL SEAL GAIL S WINTERS Notary Public NOTARY PUBLIC STATE OF ILLINOIS My Commission Expires MY COMMISSION EXPIRES 00:07/97 ********** BOX 317

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