**Enrable Power of Attorney** 

We) BRIAN P. LIES OF 739 HUMBERS FOR WILLIAMS FOR	60093
make, constitute and appoint <u>VALERIE</u> 5. <u>LIES</u> of 739 <u>Hunbour Ale Williams</u> , y (our) true and lawful attorney, to act in, manage, and conduct all my (our) estate and all my (our) affairs, in my mic, place and stead as my (our) act and deed, either to do and execute, or to concur with persons jointly interest the me (us) in the doing or executing of all or any of the following acts, deeds, and things:	(011)
To borrow money on such terms as my (our) attorney may choose.	
To purchase, sell, lease, convey, assign, pledge, hypothecate, mortgage and warrant, or otherwise deal with any or all personal property in which I (we) may have an interest, for such purposes and upon such terms and in such form as my	
ur) attorney may choose, including, but not limited to, property located in the VIVIAC Et Winnestel	
County, State of 1111:W13 , described as:	
restricts of 48985 1032  restricts of 48985 1032  restricts of 48985 1032  restricts of 48985 1032	S 87315868
x Identification Number: 05-17-409:013 including all lands and inter	

To make, execute, acknowledge and deliver under seal or otherwise any contract, agarement, bond, note, mortgage, deed trust, deed, assignment, pledge, security agreement, power, guaranty, application for enable, application for insurance, tement, tax form, affidavit, disclosure, consent, amendment, election, vote, waiver, escrew a treement, endorsement, tification, promise, receipt, acknowledgment, instruction, order form, commitment, accounting, invification, letter, rider, dendum, authorization, appointment, power of attorney, stipulation, disclaimer, accord and splitfaction, settlement tement, settlement agreement, closing statement, closing instruction, disbursement authorization, listing agreement, pordination agreement, release discharge, questionnaire, proprietary certificate, request, document, form required by any teral, state or local law, regulation or ordinance, or other instruments which said attorney may deem necessary;

rein contiguous or appurtenant to land owned or claimed by me (us), whether or not specifically described above.

To make, draw, sign, endorse, accept or otherwise place my (our) name or signature upon any checks, notes, drafts or er instruments;

And to receive and collect and to give acquittances for all sums of money at any time due me (us).

Giving and Granting unto my (our) named attorney full power and authority to do and perform all and every act, deed. tter and thing whatsoever, in and about my (our) estate, property, and affairs as fully and effectually to all intents and poses as I (we) might or could do in my (our) own proper person if personally present, the above specifically enumerated vers being in aid and exemplification of the full, complete, and general power herein granted and not in limitation or inition thereof; and hereby ratifying all that my (our) said attorney shall lawfully do or cause to be done by virtue of this ument.

EC PRIVATE BANKING And I (we) hereby declare that any act or thing lawfully done hereunds by my our sudantioner shall be binding on e (us) and my (our) heirs, conservators, guardians, trustees, legal and personal representative, and assigns, whether the same all have been done before or after my (our) death, or other revocations of this instrument, unless and until reliable

telligence or notice thereof shall have been received	by my (our) said attorney.
This appointment being executed by me (us) shared me (us) in the entireties or as community property,	all cover my (our) jointly and severally owned property, property owned, and property owned by a trustee for my (our) benefit.
This power of attorney shall expire and terminate	e on <u>Mail</u> 11 . 19 97
This power of attorney shall not be affected by m	ry disability (or the disability of either or both of us).
In Witness Whereof, I (we) have set my (our) ha	and and seal this day of
<u>April 1997</u>	
Vitnesses:	Signers:
Minhen Clevett	The state of the s
Showa EH BONARE	10 lby 5. acl
STATE OF MINORS (STATE OF MINORS) SE	· ·
County of Cook-	ى و -
The foregoing instrument was acknowledged before n	rething 215T day of
april 1997	$\tau_{\odot}$
by Euc M. Kari	as o
	Notary Public Cl
OFFICIAL SEAL  EVE M KARRAS  NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 12/05/98	<b>^^</b>
	State of MINUIS
	5/98 <b>C</b>
	My Commission Expire: 12/5/98
This instrument drafted by: Thomas J. Tate (P21275)	
P.O. Box 331789 Detroit, Michigan 48232-7789	With regimeled peturn to:
•	First Chica . Winnotka
A	791 Elin < 45-24
(Blank lines completed by:	Minnotko IC 60093-2344
Phase Type	

## **UNOFFICIAL COPY**

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