

DURABLE POWER OF ATTORNEY

POWER OF ATTORNEY  
made this 16th day of  
June, 1998.

I, JACQUELINE G.  
GROVES, hereby appoint

JOHN B. TURCZA, married to LISA E. GROVES, of 1136 NORRDE,  
River Forest, Illinois

as my/our attorney-in-fact (my/our "agent") to act for me/us and  
in my/our name, EVEN IF I/WE AM/ARE DISABLED, (in any way I/we  
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 transaction and borrowing transaction, i.e.  
the closing of real property legally described as follows:

LOT 25 IN BLOCK 18 IN HOLSTEIN BEING A SUBDIVISION OF THE WEST 1/2  
OF THE NORTHWEST 1/4 OF SECTION 31, TOWNSHIP 40 NORTH, RANGE 14  
EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

COMMONLY KNOWN AS: 2072 N. OAKLEY, CHICAGO, ILLINOIS

PIN: 14-31-128-019

2. The powers granted above shall not include the following powers  
or shall be modified or limited in the following particulars:

NONE

3. In addition to the powers granted above, I/we grant my/our agent  
the following powers:

TO EXECUTE ANY DOCUMENTS NECESSARY TO CONSUMMATE THE CLOSING OF  
2072 N. OAKLEY, CHICAGO, ILLINOIS.  
SPECIFICALLY, BUT NOT BY WAY OF LIMITATION, TO EXECUTE A MORTGAGE  
AND NOTE IN THE AMOUNT OF \$330,280.00 GIVEN TO NORWEST MORTGAGE  
TO EXECUTE ANY OTHER DOCUMENTS REQUIRED BY NORWEST MORTGAGE,  
REVENUE DECLARATIONS, ALTAs, RESPAs, ETC.

BOX 333-CTI

5 JOC 98109026/5360722 ID 012

4. My/our 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/our agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me/us who is acting under this power of attorney at the time of reference.

5. My/our agent shall not be entitled to reasonable compensation for services rendered as agent under this power of attorney.

6. This power of attorney shall become effective on:

JUNE 16, 1998

7. This power of attorney cannot be revoked by me/us but shall terminate on:

JULY 17, 1998

8. If any agent named by me/us shall die, become legally disabled, resign or refuse to act, this power of attorney shall terminate automatically.

9. I/we am/are fully informed as to all the contents of this form and understand the full import of this grant of powers to my/our agent.

SIGNED

*Jacqueline Groves*  
JACQUELINE G. GROVES

SOCIAL SECURITY NUMBER

305-58-9206

Specimen signatures of agent

*John B. Jones*  
AGENT

I certify that the signature of my/our agent is correct

*Jacqueline Groves*  
JACQUELINE G. GROVES

UNOFFICIAL COPY

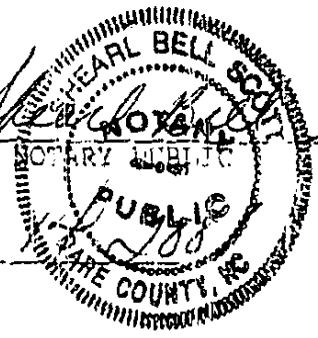
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STATE OF NORTH CAROLINA )  
COUNTY OF Dare ) SS

The undersigned, a Notary Public in and for the above County and State certifies that JACQUELINE G. GROVES, 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.

Dated: June 16, 1998 Michael Bell Scott

My Commission expires: October



prepared by & sent to:  
Adina A Turza  
1170 Monroe  
Rivers Forest R

Copy of Cook County Clerk's Office