## SPECIFIC POWER OF ATTORNEY – VA



know all Men By These Presents, that I Maria M. Love (name of borrower as it will be on title), of the county of Lane, of State of Creat do hereby constitute and appoint Nicole Kelly of the county of Lake State of The make, execute, accept, and deliver any contract, paper and other document in regard to the purchase and the financing of that purchase of the below described property lying in the County of Lake , State of The land, and more particularly described as follows:

LOT 57 IN FOXWOOD ESTATES, UNIT 2, AN ADDITION TO THE TOWN OF SCHERERVILLE, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 69-PAGE 17, IN THE OFFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

(Legal Description)

5337 MOUNT DR. SCHERERVILLE, IN 46375

(Street Address)

THAT said purchase price is \$\( \frac{222,000.00}{229,326.00} \) and that a VA loan in the approximate amount of \$\( \frac{229,326.00}{209,326.00} \) will be paid in 360 monthly installments of approximately \$\( \frac{1,449.50}{49.50} \) (principal and interest) at \$\( \frac{6.5}{6.5} \)% per annum, or the prevailing rate of interest. Lake County Recorder!

I FURTHER HEREBY make, constitute and appoint my aforesaid attorney-in-fact to make, endorse, receive, sign, seal, execute, acknowledge, accept, and deliver any and all deeds of trust, deed of trust notes, settlement statements, truth-in-lending statements and any and all required Veteran Administration documents or any other documents which may be required to consummate this loan.

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 in any event shall expire at midnight on January 31, 2009

This Power of Attorney shall be binding on my, 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 received.

14-LP

FILED

COMMUNITY TITLE COMPANY FILE NO <u>L 40607</u>

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PEGGY HOLINGS KAYOMA

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.
IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10 <sup>th</sup> day of November 1, 2000.
Name of borrower as appearing above)
STATE OF DEGON COUNTY OF LANG
I HEREBY CERTIFY, that before me, a Notary Public in and for the jurisdiction aforesaid, on this
(Personalized Seal) This Document is tNotary Public's Signature
The Lake County Recorder!  OFFICIAL SEAL  ASPLEY STOREY  NOTARY PUBLIC - OREGON COMMISSION NO. 416014  WY COMMISSION EXPIRES SEPT. 18, 2010  My commission expires  Jup t. 19 th 2010
SEAL MOIANA