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A LENDER PROCESSING SERVICES COMPANY

LSI Title Agency Inc., an Illinois Corporation

Return To: ) 2192869  
LSI-LPS  
East Recording Solutions  
700 Cherrington Parkway  
Coraopolis, PA 15108

(866) 874-3593

AND WHEN RECORDED MAIL TO  
LSI East Escrow Division  
700 Cherrington Parkway  
Coraopolis, PA 15108  
(866) 874-3593

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**POWER OF ATTORNEY AND CORRECTION AGREEMENT**

Granted for a Refinance of the property whose address is 8449 PINE ISLAND DR hereinafter the "Transaction", occurring on or about August 22, 2011.

No change of amount, interest or due date will be permitted under this authorization.

Closing Documents include but are not limited to: Notes, Deeds, Mortgages/Deeds of Trust, Subordinations, security instruments, riders, attachments and addenda, including documents necessary or requested as part of this transaction by Title Insurer, Lender, or the other parties to the transaction, including but not limited to governmental and taxing authorities, which may include but are not limited to the following types of documents: authorizations to obtain payoffs, releases of mortgages and liens; certificates for birth, death and marriage (related to this transaction); communications with lenders and judgment and lien holders to satisfy or subordinate their liens. In addition, in the event of clerical error or mistakes, including but not limited to omissions, spelling, grammatical, typographical and scrivener errors, then in such event Undersigned, hereby gives its consent and grants authority to Title Insurer to correct any omission, misstatement or inaccuracy and execute any new or corrected or completed documents as may be deemed necessary to remedy any omission, inaccuracy or misstatement.

I/We ("Undersigned"), hereby make(s) and appoints and by this Power of Attorney do(es) make, constitute and appoint either Tara Crago, Amanda Moro, Jessica Zacheral, Katie Wilkins, Brian Grafton or Ellen Hatten as a representative of LSI Title Agency, Inc., ("Title Insurer"), the true and lawful attorney-in-fact for Undersigned, and in Undersigned's name to complete, execute, sign our names, place our initials on "Closing Documents" related to the above referenced Transaction, and to execute, by the initialization and signature (as required) on any one of the following authorized Title Insurer employee or agents, Tara Crago, Amanda Moro, Jessica Zacheral, Katie Wilkins, Brian Grafton or Ellen Hatten for the purpose of completing the Closing Documents in the above referenced transaction.

This Power of Attorney is effective unless revoked by Undersigned upon 30 days prior written notice. Further giving and granting said attorney, full power and authority to do and perform all and every act and thing whatsoever necessary to be done in and about the specific and limited premises (set out herein) as fully, to all intents and purposes, as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney shall lawfully do or cause to be done by virtue hereof. A photocopy of this form shall be as acceptable as an original. In Witness Whereof, intending to be bound, I have hereto set my hand and seal this

17th day of August 2011

AMOUNT \$ 15<sup>00</sup>

CASH          CHARGE         

CHECK # 140173302

OVERAGE         

COPY         

NON-COM         

CLERK 185

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POWER OF ATTORNEY AND CORRECTION AGREEMENT  
(Continued)

Borrower Signature: *Robert A McGreal Jr, Trustee*  
ROBERT A MCGREAL JR

Witness if Required (Sign and Print)

Second Witness if Required (Sign and Print)

Co Borrower Signature: *Lynne McGreal, Trustee*  
LYNNE MCGREAL

Witness if Required (Sign and Print)

Second Witness if Required (Sign and Print)

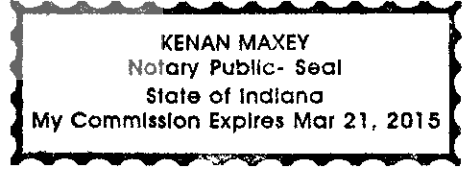
ALL PURPOSE ACKNOWLEDGMENT

State of Indiana  
County of Lake

On 8-17-2011 before me, (insert name of title of officer/notary) KENAN MAXEY, personally appeared (insert name of borrower) ROBERTA MCGREAL JR & LYNNE MCGREAL, who 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 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 the instrument.

I certify under penalty of perjury, under the laws of the State of Indiana that the foregoing paragraph is true and correct.  
Witness my hand and official seal.

Signature *Kenan Maxey* (seal)



Jurat  
State of Indiana  
County of Lake

Subscribed and sworn to (or affirmed), before me on this 17th day of August, 2011 by ROBERTA MCGREAL JR & LYNNE MCGREAL, prove to me on the basis of satisfactory evidence to be the person(s), who appeared before me.

Signature *Kenan Maxey* (seal)



Order No.: **12192869**  
Loan No.: 1958325214

### **Exhibit A**

The following described property:

Lot 146 Pine Island Ridge Unit 7, as per plat thereof, recorded in Plat Book 45, Page 122,  
in the Office of the Recorder of Lake County, Indiana.

Assessor's Parcel No: 45-11-24-477-005.000-036

