THIS INSTRUMENT PREPARED BY:

THQMAS J. SPINA

FAWAL & SPINA 1330 21st Way South Suite 200 Birmingham, Alabama 35205

STATE OF ILLINOIS \*
COUNTY OF Cook \*

## **DURABLE POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS:

That I, the undersigned, DOUGLAS E. FITZRANDOLPH, formerly residing in Jefferson County, Alabama, but currently residing in Chicago, Illinois, have made, constituted and appointed, and by these presents do make, constitute and appoint my wife, SHERILYN FITZRANDOLPH, of Birmingham, Alabama, my true and lawful attorney, for me and in my name, place and stead to ask, demand, sue for, collect and receive all sums of money, dividends, interest, payments on account of debts and legacies and all property now due or which may hereafter become due and owing to me, and give good and valid receipts and discharges for such payments; to sell, assign, and transfer stocks and bonds and securities standing in my name or belonging to me; to buy and sell securities of all kinds in my name and for my account and at such prices as shall seem good to him/her; to sign, execute, acknowledge and deliver in my name all transfers and assignments of securities; to manage real property, to sell, convey and mortgage realty, and to foreclose mortgages and to take title to property in my name if he/she thinks proper, to execute, acknowledge and deliver deeds of real property, mortgages, releases, satisfactions and other instruments relating to realty which he/she considers necessary; to place and effect insurance; to do business with banks, savings and loan associations and other financial institutions, and particularly to endorse all checks and drafts made payable to my order and collect the proceeds; and to open accounts in my name or in his/her name as my attorney-in-fact; to make such payments and expenditures as may be necessary in connection with any of the foregoing matters or with the administration of my affairs; hereby giving and granting to my said attorney full power and authority to do and perform all and every act and thing whatsoever necessary to be done in the premises, as fully to all intents and purposes as I might do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney may do pursuant to this power.

This Power of Attorney shall not be affected by the disability, incompetency, or incapacity of the principal.

IN WITNESS WHEREOF, as Principal, the undersigned has hereunto executed this Durable Power of Attorney, this the 18th day of March, 1997.

STATE OF ILLINOIS \* Cook

I, the undersigned, a Notary Public in and for said County in said State hereby certify that DOUGLAS E. FITZRANDOLPH whose name is signed to the foregoing Power of Attorney, and who is known to me, acknowledged before me on this day that, being informed of the contents of this Durable Power of Attorney, has executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this the 18th day of March, 1997.

Notary Public

Notary Public

My Commission Expires: 

April 25, 1999

OFFICIAL SEAL TIRA L. SEALS NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES 4-25-99

Inst # 1997-17814

06/06/1997-17814 2 10:39 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 11.00 OOS HCD