

Instrument prepared by Thomas Betz
700 Cherrington Pkwy.
Coraopolis, PA 15108
(800) 916-4-3524

5/23/07 2:03:55
P BK 120 PG 133
DESOTO COUNTY, MS
W.E. DAVIS, CH CLERK

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LIMITED POWER OF ATTORNEY

Caution: this is an important document. It gives the person whom you designate (your "Agent" also called "Attorney in Fact") broad powers for a specific transaction, to handle your property during a certain period of time, which may include powers to mortgage your real property with advance notice to you by web based closing. These powers will continue to exist even after you have become disabled or incompetent. This document does not authorize anyone to make medical or other health care decisions. You may execute a different document, a health care proxy to do this. If there is anything about this form that you do not understand, you should ask an attorney to explain it to you.

BE IT KNOWN, that DAVID E CHREENE

and
LISA CHREENE

whose address is 1726 CARLEE DR
HERNANDO, MS 38632

has made and appointed, and by these presents does make and appoint the following persons who are employees of LSI, namely: Greg Perdziola, Shannon Obringer, Ryan Flaherty, Thomas Betz, Sheila Allen, Quinn Riordan and Stacey Franciscus each of whom may act separately, whose addresses are C/O LSI, at 700 Cherrington Parkway, Coraopolis PA 15108, my/our true and lawful attorney in fact (also called agent) for them and in their name, place and stead, for the following specific and limited purposes:

- (1) Refinancing of the Real Estate located at 1726 CARLEE DR, HERNANDO, MS 38632, and to be refinanced with E - Loan Inc-70788, said refinancing to occur on or about May 25, 2007 in an amount approximately \$ 10,000.00 .
- (2) To mortgage, finance, refinance, hypothecate, assign, transfer, and in any manner deal with the real estate to effectuate the above referenced refinancing (which may also be called "banking transactions" under state statute);
- (3) To execute, acknowledge, and deliver escrow instructions, and all Closing Documents which including but not limited to: Notes, Deeds, Mortgages/Deeds of Trust, Subordinations, security instruments, riders, attachments and addenda, including any documents necessary or requested as part of this transaction by Title Insurer, Lender or the other parties to the

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and

transaction, those documents needed by governmental and taxing authorities, covenants, agreements and assignments of agreements, assignments of mortgages, assignments of deeds of trust, to secure the referenced indebtedness, lien waivers, encumbrance or waiver of homestead and any marital rights necessary to obtain the financing, settlement statements, truth in lending disclosures, loan applications, HUD 1 and other written instruments of whatever kind and nature, all upon such terms and conditions as said attorney in fact (also called agent) shall approve.

Further giving and granting said attorney in fact (also called agent), 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 (setout 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 in fact (also called agent) should lawfully do or cause to be done by virtue hereof.

This Power of Attorney shall become effective immediately, and shall not be affected by my subsequent disability, incapacity or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue until the Mortgage/Deed of Trust is recorded in the appropriate office. I may revoke this Power of Attorney at any time by providing written notice to my Attorney in Fact (also called agent), however such revocation shall not be effective as to third parties acting in reliance upon this Power of Attorney if recorded, unless and until the revocation is similarly recorded in the same county and state registry or other established records for the recording of Powers of Attorney. This Power of Attorney is limited to a specific refinance, and the powers noted shall continue only through and including any post closing corrections, amendments and follow up procedures, but shall cease when the refinance and all post-closing matters are fully accomplished.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Dated 5-1-07, 20007 at 9:30 am

David E. Chreene

Partial Password 9933

DAVID E CHREENE

Lisa Chreene

LISA CHREENE

State of TN

County of Shelby

On May 1, 2007 before me, Diann White, Notary Public
DATE NAME, TITLE OF OFFICER - E.G. "JANE DOE, NOTARY PUBLIC"

personally appeared DAVID E CHREENE LISA CHREENE

personally known to me - OR - 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.



WITNESS my hand and official seal.

MY COMMISSION EXPIRES AUG. 30, 2008
MY COMMISSION EXPIRES AUG. 30, 2008

Diann White
SIGNATURE OF NOTARY
Diann White

OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNEER

DESCRIPTION OF ATTACHED DOCUMENT

- INDIVIDUAL
- CORPORATE OFFICER

- TITLE(S)
- PARTNER(S) LIMITED
 - GENERAL
 - ATTORNEY IN FACT
 - TRUSTEE
 - GUARDIAN/CONSERVATOR
 - OTHER _____

TITLE OR TYPE OF DOCUMENT

NUMBER OF PAGES

DATE OF DOCUMENT

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

SIGNER(S) OTHER THAN NAMED ABOVE

ACKNOWLEDGMENT OF ATTORNEY-IN-FACT

I, AGENT, have read the attached power of attorney and am the person identified as the attorney-in-fact (the "agent") for the principal. I hereby acknowledge that in the absence of a specific provision to the contrary in the power of attorney or in state law., when I act as agent:

I shall exercise the powers for the benefit of the principal.

I shall keep the assets of the principal separate from my assets.

I shall exercise reasonable caution and prudence.

I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

Thomas Pretz
AGENT
TLB
Signature of Attorney-in-Fact
5/7/07
Date

Witness: _____

Witness: _____

printed name of witness: _____
(if required)

printed name of witness: _____
(if required)

Specimen signature of AGENT/Attorney in Fact:

Thomas Betz

Prepared by ~~anderson~~
LSI - Thomas Betz
700 Cherrington Parkway
Coraopolis PA 15108
(800) 964-3524

SAME NAME AFFIDAVIT

Before me, the undersigned authority, this day personally appeared Lisa Chrene
("Affiant") who being by me first duly sworn, affirmed as follows:

- Affiant is one and the same person as: Lisa C. Chrene
- Affiant may also be known by the following name variances (sign those variables or write N/A if that name has never been used for you):

First initial, second initial, full last name: _____
First and middle initials and last name: _____
Nicknames: _____

Affiant states that they were previously known as _____, but due to marriage/divorce, have taken the name of _____ and that name is now their true and correct legal name.

Affiant states that they were previously known as _____, but due to a court order changing their legal name, have taken the name of _____ and that name is now their true and correct legal name per Court Order recorded at in _____ county _____, DBV _____ page _____;

- This affidavit is given in reference to the conveyance/purchase/refinance of the property described as: _____

AFFIANT is making this affidavit for the benefit of LSI/ Chicago Title Insurance/Fidelity Title Insurance who is relying upon the total correctness of this affidavit for issuing title insurance.

When I sign below I am affirming this as my legal signature for any conveyance/refinance/purchase document no matter what variance may show in the typing of my name, and for all names by which I may be known.

Intending to be bound, I have signed this 7 day of May, 2007.

Use as attorney in fact
of attorney in fact
(SIGNATURE)
Lisa Chreene by Thomas Betz
(PRINT NAME OF AFFIANT) as A-I-F

Witness

Witness Printed Name

Witness

Witness Printed Name

STATE OF Pa
COUNTY OF Allegheny

Sworn to and subscribed before me this 7 day of May, 2007, by Lisa Chreene
by Thomas Betz as Attorney in fact, who was personally known to me or who presented
_____ as identification.

Commission No.
Commission Expiration: 10-4-09

Magda Esposito
(Signature of Notary)
Magda Esposito

(Printed name of Notary- Stamp/Seal if required)

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Magda Esposito, Notary Public
Moon Twp., Allegheny County
My Commission Expires Oct. 4, 2009
Member, Pennsylvania Association of Notaries



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POWER OF ATTORNE
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