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Cook County Recorder

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ILLINOIS STATUTORY

SHORT FORM POWER OF

ATTORNEY FOR PROPERTY

DOOR OR C (NOTICE: THE PURPOSE OF THIS FOWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAL YOURS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN A POWER IS EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENT. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS FOWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAN EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MOFE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATT CANEY FOR PROPERTY LAW." THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO **EXPLAIN IT TO YOU.)**

POWER OF ATTORNEY MADE THIS // DAY OF JANUARY, 2001

I, Kathy A. Janicki, 10416 South Oakley, Chicago, Illinois 60643, hereby appoint Richard G. Janicki, 10416 South Oakley, Chicago, Illinois 60643, as my attorney-in-fact (my "agent") to act for me and in my name (in any way I 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:

1st AMERICAN TITLE order # HY

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(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWER YOU DO NOT WANT YOUR AGENT TO HAVE, FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATEGORY TO BE GRANTED TO THE AGENT, TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

- (a) Real estate transactions.
- (b) Financial institution transfers.
- (c) -- Stock and bond transactions.
- (d) Tangible personal property transactions.
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Rotirom in plan transactions.
- (h) Social Sourity employment and military service benefits.
- (i) Tax matters.
- (j) Claims and litigative.
- (k) Commodity and option transactions:
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (e) All other property powers and temperations.

SEE EXHIBIT A ATTACHED HERETO FOR LEGAL DESCRIPTION, STREET ADDRESS AND PERMANENT TAX INDEX NUMBER(S).

(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE.)

THIS DOCUMENT PREPARED BY AND MAIL TO:

Fuchs & Roselli, LTD

440 West Randolph Street
Suite 500
Chicago, Illinois 60606



(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

	shall not include the following powers or shall be
	ılars (here you may include any specific limitations you
deem appropriate, such as a prohibition or o	conditions on the sale of particular stock or real estate or
special rules on borrowing by the agent):_	Not Applicable

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3. In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below): NONE
(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IF YOU WANT TO GIVE YOUR AGENT THE RIGHT TO DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHERS, YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)
My 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 agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by us who is acting under this power of attorney at the time of reference.
(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)
5. My agent shall be entitled to reasonable componsation for services rendered as agent under this power of attorney.
(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AND IN ANY MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A LIMITATION OF THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER [OR BOTH] OF THE FOLLOWING:)
6. (X) This power of attorney shall become effective on <u>January 16, 2001</u> . (insert a future date or event during your lifetime, such as court determination of your disability, when you want this power to first take effect)
7. (X) This power of attorney shall terminate on <u>with the closing of the real estate</u>
(insert future date or event, such as court determination of your disability, when you want this power to terminate prior to your death) (IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

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8. If any agent named by me shall die, I name the following (each to act alone and successi agent: NONE	become legally disabled, resign or refuse to act, vely, in the order named) as successor(s) to such	
(IF YOU WISH TO NAME A GUARDIAN OF Y ESTATE, OR BOTH, IN THE EVENT A CO APPOINTED, YOU MAY, BUT ARE NOT RE NAME(S) OF SUCH GUARDIAN(S) IN THE F WILL APPOINT THE PERSON NOMINATED B APPOINTMENT WILL SERVE YOUR BEST INTO ARE NOT FEQUIRED TO, NOMINATE AS Y NAMED IN THIS FORM AS YOUR AGENT.)	URT DECIDES THAT ONE SHOULD BE QUIRED TO, DO SO BY INSERTING THE OLLOWING PARAGRAPHS. THE COURT Y YOU IF THE COURT FINDS THAT SUCH TERESTS AND WELFARE. YOU MAY, BUT	
9. If a gua dian of my person is to be	appointed, I nominate the following to serve as	
such guardian:		
NONE (insert name and address of no minated gua	rdian of the nerson)	
	•	
	erty) is to be appointed, I nominate the following	
to serve as such guardian: NONE		
(insert name and address of nominated gue	dian of the estate)	
4. The A	itte Con including this mage	
11. This document consists of 5 typewr	itten pages, including uns page.	
12. I am fully informed as to all the contents of this form and understand the full import		
of this grant of powers to my agent.		
SIGN	MED: Kathy & Janicki	
(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES BELOW. IF YOU INCLUDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)		
Specimen signatures of agent	I certify that the signatures (and successors) d	
	my agent (and successors) are correct.	
B. 1.1	Hathy a Januar	
Richard G. Janicki (Agent)	Kathy A. Janicki	

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STATE OF ILLINOIS)	
) ss.	
COUNTY OF COOK)	

The undersigned, a notary public in and for the above county and state, certifies that Kathy A. Janicki, known to me to be the same person whose name is subscribed as principal to the foregoing ower 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 [and certified to the correctness of the signature(s) of the agent(s)].

Dated: January 16 2001.

Notary Public

My commission expires:

OFFICIAL SEAL
CHRISTINE M. BAMBUCH
NOTAR PUB JC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 10-31-2004

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