

UNOFFICIAL COPY

0010415721

2001-05-17 11:17:42

Cook County Recorder

31.50



0010415721

**ILLINOIS STATUTORY  
SHORT FORM POWER  
OF ATTORNEY FOR  
PROPERTY**

**FOR**

**BLANCHE SHIMKO**

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS 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 POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO EXERCISE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. 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-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU ARE DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY 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 YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

153945

60

**POWER OF ATTORNEY**, made this 16th day of February, 2001.

1. I, BLANCHE SHIMKO, of 1419 South Scoville, Berwyn, Illinois 60402, hereby appoint HARVEY D. SHIMKO, of 15955 Ashford Court, Tinley Park, Illinois 60477 as my attorney-in-fact (my "agent") to act for me 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

STEWART TITLE COMPANY  
2 N. LaSALLE STREET  
SUITE 1920  
CHICAGO, IL 60602

# UNOFFICIAL COPY

Attorney for Property Law" (including all amendments), but subject to any limitations on or in additions to the specified powers inserted in paragraph 2 or 3 below:

(YOU MUST STRIKE OUT ANYONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS 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 transactions.
- (c) Stock and bond transactions.
- (d) Tangible personal property transactions.
- (e) Safe deposit transactions.
- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (h) Social security, employment and military service benefits.
- (i) Tax matters.
- (j) Claims and litigation.
- (k) Commodity and option transactions.
- (l) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) Trust Transactions.
- (p) To make gifts
- (q) All other property powers and transactions.

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

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars (here you may include any specific limitations you deem appropriate, such as a prohibition or conditions on the sale of particular stock or real estate or special rules on borrowing by the agent): NONE

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 THE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS

10415721

# UNOFFICIAL COPY

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.)

4. 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 agent) named by me 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 compensation 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 MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL BE EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A LIMITATION ON THE BEGINNING OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

6. This power of attorney shall become effective at such time I am unable to manage my estate or financial affairs as determined by my attending physician.

7. This power of attorney shall terminate upon my death, unless previously revoked by me.

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) IN THE FOLLOWING PARAGRAPH.)

8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I name the following (each to act alone successively in the order named) as Successor(s) to such agent:

Successor: JACK J. SHIMKO; and

Second Successor: \_\_\_\_\_.

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the

# UNOFFICIAL COPY

person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matter, as certified by a licensed physician.

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECREES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

10. I am fully informed as to all the contents of this form and understand the full import of the powers to my agent.

Blanche Shimko  
BLANCHE SHIMKO

(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, AND YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURE(S) OF THE AGENTS.)

Specimen signature of agent.

I certify that the signature of my agent is correct.

Harvey D. Shimko  
Agent, HARVEY D. SHIMKO

Blanche Shimko  
Principal, BLANCHE SHIMKO

Jack J. Shimko  
Successor Agent, JACK J. SHIMKO

Blanche Shimko  
Principal, BLANCHE SHIMKO

Second Successor Agent,

Principal, BLANCHE SHIMKO

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED < AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)

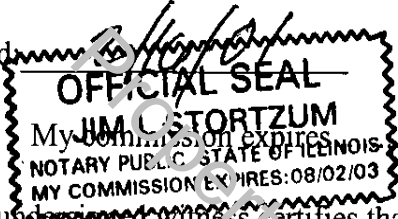
10415721

# UNOFFICIAL COPY

State of Illinois )  
 ) SS.  
County of Cook )

The undersigned, a notary public in and for the above county and state, certifies that BLANCHE SHIMKO, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the additional witness 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: \_\_\_\_\_



*[Signature]*  
Notary Public

The undersigned witness certifies that BLANCHE SHIMKO known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory.

Dated: Feb. 16, 2001

(SEAL) *[Signature]*  
Witness

(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 was prepared by:

Jim L. Stortzum  
Attorney at Law  
10723 West 159th Street  
Orland Park, Illinois 60467  
(708) 349-4002

F:\SHIMKO.PRO\pm11



*Mail to:*  
**JIM L. STORTZUM  
ATTORNEY AT LAW  
10723 W. 159th STREET  
ORLAND PARK, IL 60467**

10415721

UNOFFICIAL COPY

10415721

LOT 33 IN THE SUBDIVISION OF BLOCK 35 OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THE SOUTH 300 ACRES THEREOF), IN COOK COUNTY, ILLINOIS.

16-19-221-008

1419 S. Seaville Ave

Berwyn, IL 60402