Cook County Recorder

59.00

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

(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 EXECUSE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCY WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE FOWERS 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 BECOME 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" OF WHICH THIS FORM IS A PART (SEE THE BACK OF THIS FORM). 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 70 YOU.)



POWER OF ATTORNEY made this ## day of January (month) 2002 (year) I, Chicago, IL (insert name and address of principal) hereby appoint:

Jennifer G. Gallery, Chicago, IL (insert name and address of agent) 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 - 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 or below:

(YOU MUST STRIKE OUT ANY ONE 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.

The undersigned witness certifies that
Joseph P. Hynes , 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: -11-02 (SEAL) Witness OFFICIAL STATEMENT
GARY I WIGOR
(THE NAME AND ADDRESS OF THE PERSON PREPARING THE THE MAN BE WASHINGTON
INSERTED IF THE ACENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL 06/28/02
ESTATE.)
This document was prepared by: and Mail To.
Jennifer G. Gallery, Esq., 444 N. Michigan Ave., #2600, Chicago, IL 60611
Clart's Office



CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1408 H22004185 HE STREET ADDRESS: 4831 N. MULLIGAN

CITY: CHICAGO COUNTY: COOK

TAX NUMBER: 13-08-316-068-0000

LEGAL DESCRIPTION:

LOT 11 AND THE SOUTH 13.25 FEET OF LOT 12 IN MEYER'S AND WORTHINGTON'S NARRANGASETT AVENUE SUBDIVISION OF THE NORTH 5 ACRES OF THE SOUTH 10 ACRES OF THE WEST 20 ACRES OF THE SOUTH WEST 1/4 OF THE SOUTH WEST 1/4 OF SECTION 8, The MGE.
153, IN

Clark's Office TOWNSHIP 40 NORTH RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, RECORDED AS DOCUMENT NUMBER 8450153, IN COOK COUNTY, ILLINOIS

20163020

 (e) Stock and bond transactions. (d) Tangible personal property transactions. (e) Safe deposit box 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) Businers experations. 	
 (e) Safe deposit box 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. 	
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(k) Commodity and option transactions.	
(I) Busines - e perations	
· · · · · · · · · · · · · · · · · · ·	
(m) Borrowi: g ransactions.	
(n) Estate transa ப்று.	
(o) All other property rowers and transactions.	
(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUIN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW. The powers granted above shall not include the following powers or shall be modificated in the following particulars (here you may include any specific limitations you appropriate, such as a prohibition or conditions on the sale of particular stock or real or special rules on borrowing by the agent): Execution of any and all documents in correction with the	W.) fied on deem
home equity loan for the premises located at 4831 North Mulligan, Chicago, Illinois.	
In addition to the powers granted above, I grant my agent the following powers (her may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint to a 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

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UNOFFICIAL COPY

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 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.)

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 ANY MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWEL OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A LIMITATION ON THE BEGINNING PATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

(x) This power of attorney shall become effective on

business matters, as certified by a licensed physician.

January 21, 2002	(insert a future date
or event during your lifetime, such as court determine power to first take effect).	nination of your disaling, when you want this
(x) This power of attorney shall terminate on	74,
February 8, 2002	(insert a future date
or event, such as court determination of your disprior to your death)	ability, when you want this power to term inate
(IF YOU WISH TO NAME SUCCESSOR AGE ADDRESS(ES) OF SUCH SUCCESSOR(S) IN	NTS, INSERT THE NAME(S) AND THE FOLLOWING PARAGRAPH.)
If any agent named by me shall die, become incagent, I name the following (each to act alone and such agent: NONE	ompetent, resign or refuse to accept the office of successively, in the order named) as successor(s) to
	For purposes of this paragraph, a
person shall be considered to be incompetent if and incompetent or disabled person or the person is unal	d while the person is a minor or an adjudicated

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO 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 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

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in a guardian of my estate (n	ny property) is to be	appointed, I nominate the age	ent acting under this
power of attorney as such gu	uardian, to serve withou	at bond or security. I am fully in	formed as to all the
contents of this form and	understand the full imp	ort of this grant of powers to m	v agent
1200	1	or or and grain or powers to m	y agent.
Signed Terrs	Men		
	llery		
(principal) Kevari J. Ga	itery /		
· ()			•
(YOU MAY, BUT ARE NO	OT REQUIRED TO, F	REQUEST YOUR AGENT AI	ND SHICCESSOR
AGENTS TO PROVIDE S	PECMEN SIGNATI	JRES BELOW. IF YOU IN	ICI LIDE
SPECIMEN SIGNATURE	S IN THIS DOWED O	OF ATTORNEY, YOU MUST	T COLODE
THE CERTIFICATION OF		ATTORNET, YOU MUS	I COMPLETE
THE CERTIFICATION OF	PUSITE THE SIGN	ATURES OF THE AGENTS	.)
Specimen signatures of	1	I certify that the signatures of	of my agent
agent (and successors)		(and successors) are corre	
	(agent)		(principal)
	_ ` ` ` ,	94	(principar)
	(successor agent)	///	(11)
	(successor agent)		(principal)
	(successor agent)		(principal)
		· (C)	
		4	
THIS POWER OF ATTO	RNEY WILL NOT B	E EFFECTIVE UNLESS IT (S	NOTARIZED
AND SIGNED BY AT LE	AST ONE ADDITIO	NAL WITNESS, USING TH	E FORM
		// // // // // // // // // // // //	

BELOW.)

State of	ILLINOIS)
) SS
County of _	COOK	

The undersigned, a notary public in and for the above county and state, certifies that Kevin J. Callery, 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: J_{a} /1, 200 2 (SEAV)

NOTARY PUBLIC