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Property of County Clark's Office

20567737

Durable Power of Attorney

I, _	JAMES	COSTELLO	, as principal, hereby appoint PATRICIA	SABAL	RNOLOR
-, –	77.77.	<u> </u>	, as principal, hereby appoint it a killing	<u>ONUNL</u>	_nwajore

JUDITH MC AULEY as my agent, to be my attorney-in-fact, and give my agent the power to do anything I would be entitled to do, including but not limited to the power to do the following:

To sell any of the real, personal, intangible, or other property that I own now or in the future on any terms, and to use the proceeds of sale in any way.

To buy any real, personal mangible, or other property on any terms, and to use, care for, or insure my present or future property in any way.

To borrow money, use credit cards, mortgage, or allow other encumbrances against property I own not or in the future on any terms.

To invest any of my real, personal, intangible, or other property in any real, personal, intangible, or other property.

To demand, release, receive, deposit, settle for, sue for, or do anything else with any real, personal, intangible, or other property which I am entitled to now or in the future. My agent is hereby named my representative payee to receive social security penefits.

To do anything that I could do with respect to retirement and employment benefits such as IRAs, employee benefit plans, self-employment benefit plans, or other retirement plans.

To do anything that I could do with respect to bank accounts of all kinds and accounts at other institutions, including opening, changing, and closing said accounts, and including writing and endorsing checks of all kinds.

To do anything that I could do with respect to any safe deposit box I have now or in the future, including opening, changing, and closing said boxes.

To do anything that I could do with respect to any legal action or claim.

To do anything that I could do with respect to trusts created by me or created for my benefit.

To do anything that I could do with respect to insurance policies on my life or the life of anyone in whom I have an insurable interest.

To do anything that I could do with respect to tax matters and tax returns for the years

between	and	including the power to sign any power of attorney form
required by	the Internal Revenue Serv	vice or other taxing authority.

To make gifts of any of my property to anyone for any reason.

To lend money or other property of mine on any terms.

For any real, personal, or other property I own now or in the future, the power to lease, sublease, release, manage in any way, protect, insure, maintain, destroy, alter, grant easements upon, subdivide, develop, dedicate to the public, change boundaries or plats, collect rents and profits, and the power to do all acts that I could do regarding said property.

For any business in which I have an interest now or in the future, the power to operate said business and do ar whing regarding said business that I would be able to do.

With respect to my physical care, the power to do anything that I could do, including providing for my food, shelter, medical care, hospitalization, clothing transportation, nursing home or similar institutional care, travel and recreational activities, religious needs, funeral and burial arrangements, making anatomical gifts, having access to medical records and other personal Information, having the power to a limit me to medical facilities, to hire and fire Medical personnel, to give or withhold consent to medical and psychiatric Treatment, including surgical procedures, and to grant releases to medical personnel.

I hereby authorize all persons or entities to release any medical or other information my agent requests regarding me to my agent, and I release said persons or entities from any liability for doing so.

If I revoke or amend this power of attorney, I release from any liability and will hold harmless from any loss any person or institution acting under instructions from my agent before such person or institution receives actual not co of the revocation or amendment.

This power of attorney shall not be affected by the subsequent disability or incapacity of the principal.

If any part of this power of attorney is invalid under any law, such invalidity shall not affect the remainder of this instrument.

This power of attorney shall be governed under the laws of the State of Illinois.

If this power of attorney is governed by a community property state, and the agent appointed under this power of attorney is the spouse of the principal, the agent's authority under this power of attorney only applies to the principal's separate property and the principal's one-half of community property, and is to be exercised only for the principal's benefit.

Additional provisions:

THIS POWER OF ATTORNEY IS A LEGAL DOCUMENT. IT PROVIDES THE PERSON DESIGNATED AS ATTORNEY-IN-FACT WITH BROAD POWERS OVER THE PRINCIPAL'S PROPERTY. THE POWERS EXIST FOR AN INDEFINITE PERIOD UNLESS OTHERWISE LIMITED, AND THE PRINCIPAL MAY REVOKE OR TERMINATE THE POWER OF ATTORNEY AT ANY TIME.
IN WITNESS WrEPFOF, I have executed this power of attorney on 12.01-2000
PRINCIPAL GIVING POWER: JAMES COSTELLO
PRINCIPAL GIVING POWER: De la Castella
I, the undersigned agent, hereby accept the duties and obligations of the above appointment as attorney-in-fact for the above principal.
Agent PATRICIA SABAL AND/OR JUDITH MCCAULEY
We hereby declare that on 12-01-2006
we witnessed TAMES COSTELLO as principal, sign the above power of attorney in our presence, that the principal declared and published it to us as his or her power of attorney, that we know the principal personally and believe he/she is of sound mind and that he/she signed said power of attorney freely and voluntarily, and that we witnessed said principal sign said power of attorney at his/her request and signed this statement at his/her request.
Dated this 12 day of <u>December</u> 2000 WITNESS <u>Perice Kealing</u>
ADDRESS 20621 Ivy Path
Frankfort, 12 60423
WITNESS Janifes Herotouski
ADDRESS 4409 Elm
Lyons, FL. 60534

(FOR NOTARY PUBLIC)

STATE OF <u>ILLINOIS</u> COUNTY OF <u>COOK</u>
I, <u>FLIZABETH BEAMAN</u> , a resident of and notary public in and for the state and county named above, who am duly commissioned and sworn and legally authorized to
administer oaths and affirmation, hereby certify that on 13:01-2000 - JAMES COSTELLO
, who is known to me personally to be the principal in the above power of attorney, appeared before me, acknowledged signing the above power of attorney, and, after being first duly sworn by me under penalty of perjury, swore on his/her oath to the truth of the facts in the above power of attorney, declared said document to be a power of attorney that he/she gave to the above agent, signed it freely and voluntarily, and signed it in my presence and for the purposes explained in said power of attorney.
Subscribed and sworn to before me this $\frac{12}{2}$, day of $\frac{\text{December}}{2000}$, 2000.
Notary Public
Elizabeth Beaman Solvential Seal ELIZABETH BEAMAN NOTARY PUBLIC, STATE OF ILLINOIS
My Commission expires: AY COMMISSION EXPIRES 10/19/2002
10-19-2002
(Use the following clause if married)
I, the spouse of the above principal, hereby approve the above power of attorney, and waive any dower, courtesy, homestead, community proper y, and other rights
I have in property affected by the above power of attorney.
Dated this day of 2000
Spouse
Spouse
After Recording Return 10:
John P. Callahar, Jr
122 W. 22 Ne St #350
Oak Brack, IL 60523

LOT 61 IN SILVER LAKE WEST, A SUBDIVISION OF PART OF THE SOUTH EAST 1/4 OF SECTION 10, TOWNSHIP 36 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PN # 27-10-408 -004

Property of Cook County Clerk's Office