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Cook County Recorder

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NAME AND ADDRESS OF PREPARER:

70 Caribou Crss



EUGENE "GENE" MOORE

RECORDER OF DEEDS / REGISTRAR OF TORRENS TITLES COOK COUNTY, ILLINOIS

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 EXERCISE GRANTED POWERS, BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE 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 TO EXAMPLE A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS TO EXAMPLE A COURT ACTION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS FOWER 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 45/3-4 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 FOWER 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 ATTO	DRNEY mare this <u>8th</u> day of _	November		, 20 <u>_01</u> ,	
1. Stewart P. Lu	rie, 70 Caribo Crossing, North	brook, Illinois 60	0062		
	(Indert name and addres	s of principal)			
of the <u>City/Village</u>	of Northbrock		County of _Cook	in the	
State ofIllinois	hereby appoint Anita Luri	e, 70 Caribou C	rossing, Northbrook, Illia	nois 60062	
· · · · · · · · · · · · · · · · · · ·		(Insert name and address of agent)			
		46			
of the <u>City/Village</u>	of Northbrook	14	, County of <u>Cook</u>	in the	
State ofIllinois	as my attorney-in-fact (my "	agent") to act for r	ne and in my name (in any	way I could act in	
paragraphs 2 or 3 below:	following powers, as defined in S amendments), but subject to any	limitations on or a	additions to the specified p	owers inserted in	
, O	Y ONE OR MORE OF THE FOLLOWIN KE THE TITLE OF ANY CATEGORY W NT. TO STRIKE OUT A CATEGOR	MILL LIBITER 1 THE D	10MEDC DECAG DED 11 +1 -1	. 	

- (1) Real estate transactions.
- (2) Financial institution transactions.
- (3) Stock and bond transactions.
- (4) Tangible personal property transactions.
- (5) Safe deposit box transactions.
- (6) Insurance and annuity transactions.
- (7) Retirement plan transactions.
- (8) Social Security, employment and military service benefits.
- (9) Tax matters.
- (10) Claims and litigation.
- (11) Commodity and option transactions.
- (12) Business operations.
- (13) Borrowing transactions.
- (14) Estate transactions.
- (15) 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.)

	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 rea
estate or	special rules on borrowing by the agent):

3. (X) In addition to the powers granted above. I grant my agent the following powers (here you may add 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): Gift or dispose of Principal's property of any type, in any manner or way that Agent, in her sole and absolute discretion, deeems necessary or desirable, including, but not limited to,

the mortgaging or sale or transer of the property commonly known as 70 Caribou Crossing, Northbrook, Illinois 60062 (YOUR AGENT WILL HAVE AUTHORATY 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.)

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 sruech, but such delegations 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.)

5. My agent shall be entitled to reasonable compensation for services relicated 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 AT MITATION ON THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLL DWING:)

6. (χ) This power of attorney shall become effective on November 8,2001

(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. (χ) This power of attorney shall terminate on

At the time of death of the Principal.

(Insert a 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 A SUCCESSOR AGENT, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(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, and successively, in the order named) as successor(s) to such agent:

Lisa Eissman, currently of 3475 Bayberry Drive, Northbrook, Illinois 60062

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

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(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 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 surety.
- 10. 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.

	except love 11-8-01			
60-	Signed (Principal)			
(YOU MAY, BUT ARE NOT REQUIRED TO, SIGNATURES BELOW. IF YOU ! CLUDE SPECERTIFICATION OPPOSITE THE SIGNATURE	REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN CIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE IS OF THE AGENTS.)			
Specimen signatures of agent (successors)	I certify that the signatures of my agent (and successors are correct)			
(Agent)	(Principal)			
(Successor Agent)	(Principal)			
(Successor Agent)	(Principal)			
(THIS POWER OF ATTORNEY WILL NOT BE E	FFECTIVE UNLESS IT IS NOTARIZED, USING THE FORM BELOW.)			
State of <u>Illinois</u>) County of <u>Lake</u>) SS.	C			
The undersigned, a notary public in and for the above County and State, certifies the the foreign that the foreign the foreign power of attorney, appeared before me in person and acknowledged signing and delivering the instrument as the free and voluntary act of the minimal, for the uses and purposes therein set forth, (and certified to the correctness of the signature(s) of the agent(s)).				
Dated 11-8-01	SHARON SCHNEIDER Notary Public			
My commission expires: 1204	NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES 1/2/2004			
The undersigned witness certifies th				
	ne foregoing power of attorney, appeared before me and the notary public and frument as the free and voluntary act of the principal, for the uses and purposes			
therein set forth. I believe him or her to be o				
Mulipullillimally Res (Witness)	siding at 951 Brookside Deerfield, IL			
	<i>"</i>			
(THE NAME AND ADDRESS OF THE PERSON P TO CONVEY ANY INTEREST IN REAL ESTATE	REPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER (.)			

THIS DOCUMENT PREPARED BY: