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Cook County Recorder

Jant's Office



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FIRST AMERICAN LENDERS ADVANTAGE ORDER # 208880

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 OF ANTED 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 THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS.

UNLESS YOU EXPRESSLY LIMIT THE DUPATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU FOOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFTTIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN FIRST AMERICAN SECTION 3 - 4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM S A PART (SEE THE BACKENDERS ADVANTAGE OF THIS FORM). THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENTIADER # 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.)

BOWER OF ATTORNEY made this 2/ day of Other (month) 2007 (year). I.

POWER OF ATTORNEY made this 2/ day of other (month) 2007 (year). I, Lymne bolder. (insert name and address of principal) hereby appoint:

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

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES

limitations on or additions to the specified powers inserted in paragraph or below:

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.

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- (b) Financial institution transactions.
- (c) 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 r.a. s.
- (i) Claims and higation.
- (k) Commodity and option transactions.
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

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

e powers granted above shall not include the following powers or shall be modified or ited in the following particulars (here you may include any specific limitations you deem propriate, such as a prohibition or conditions on the sale of particular stock or real estate
special rules on borrowing by the agent):
8-
addition to the powers granted above, I grant my agent the following powers (here you any add any other delegable powers including, without limitation, power to make g fts, ercise powers of appointment, name or change beneficiaries or joint tenants or reverse amend any trust specifically referred to below):

(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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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 BL AMENDED OR REVOKED BY YOU AT ANY TIME AND IN ANY MANNER. ABSEN (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 ON THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTTO OF THE FOLLOWING:)

() This power of attorney shall become effective on	
Ochober 23, 2002	(insert a future date
or event during your lifetime, such as court determination	of your disabili y, when you want this
power to first take effect).	O/Z
() This power of attorney shall terminate on	16
October 24, 2002	(insert a future date
or event, such as court determination of your disability,	when you want this power to term inat
prior to your death)	
(IF YOU WISH TO NAME SUCCESSOR AGENTS, IN	SERT THE NAME(S) AND
ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FO	
If any agent named by me shall die, become incompeten	t, resign or refuse to accept the office of
agent, I name the following (each to act alone and successiv	
such agent:	44444444
F	or purposes of this paragraph, 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 gi	
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 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

(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 (and successive)		I certify that the signatures of my agent (af.d successors) are correct.
Mal Folk	(agent)	(principal)
	(successor agent)	(principal)
	(successor agent)	(principal)

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

State of <u>Illinois</u>) SS.

County of <u>Cook</u>

The undersigned, a notary public in and for the above county and state, certifies that Lynne Golden 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: Oct. 21, 2002 (SEAL)

OFFICIAL SEAL
KAREN S LAFOLLETTE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 11/28/04

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Notary Public	,
My commission expires Nov. 28, 2004. The undersigned witness certifies that	Æ
<u>Neil Golden</u> , 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 we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal, for the uses and we are the free and voluntary act of the principal act of the principal act of the uses and we are the free and the use are the us	ĤÙ
purposes therein set forth. I believe him or her to be of sound mind and memory. § OFFICIAL SEAL	
XAREN S LAFOLLET	TI
Dated: (C4 -21, 2002 (SEAL) NOTARY PUBLIC, STATE OF ILLII	
Witness Kaws. LADULETE MY COMMISSION EXPIRES: 11/28	3/0 -^^
Di di asoliteta.	
(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: アベムしてる	
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ALTA Commitment Schedule C

File No.: 208880

Legal Description:

Lot 4 in Block 8 in Provident Mutual Land Association Subdivision of Block 7 to 12 and 28 to 33 and 54 to 59 in the Village of Winnetka, in the West 1/2 of the Northeast 1/4 of Section 20, Township 42 North, Range 13, Property of County Clerk's Office East of the Third Principal Meridian, in Cook County, Illinois.

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The land referred to in this Commitment is described in Schedule C attached.

Note: For informational purposes only, the land is known as:

888 Oak Street Winnetka, IL 60093

THIS COMMITMENT IS VALID ONLY IF SCHEDULE B AND C ARE ATTACHED.

Property of Cook County Clark's Office