

Cook County Recorder

34.50



1st AMERICAN TITLE order # 366373

### 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 FOVERS 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 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 TO YOU.)

# 50418949

## **UNOFFICIAL COPY**

POWER OF ATTORNEY made this 27 day of February (month) 2003 (year).  1942 Birchwood Avenue.  I, Maria D. McCanna Wilmette, IL 60091
I. Maria D. M. Canna Wilmette, IL 60091
(insert name and address of principal)  hereby appoint:  Peter J. McCanna 1942 Birchwood Avenue  (insert name and address of agent) Wilmette, IL 60091  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 3-4 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 PUROUGH THE TITLE OF THAT CATEGORY.)
<ul> <li>(a) Real estate transactions</li> <li>(b) Financial institution transactions</li> <li>(c) Stock and bond transactions</li> <li>(d) Tangible personal property transactions</li> <li>(e) Safe deposit box transactions</li> <li>(f) Insurance and annuity transactions</li> <li>(g) Retirement plan transactions</li> <li>(h) Social Security, employment and military service benefits</li> <li>(i) Tax matters</li> <li>(1) Claims and litigation</li> <li>(k) Commodity and option transactions</li> <li>(l) Business operations</li> <li>(m) Borrowing transactions</li> <li>(n) Estate transactions</li> <li>(o) All other property powers and transactions</li> </ul>
(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY PE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED SELOW.)  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):

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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):
(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 LECISIONS. 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.)
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 POWER OF ATTORNEY WILL BECOME AFFECTIVE 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 BOTH) OF THE FOLLOWING:)
() This power of attorney shall become effective on <u>February 28, 2003</u> (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).
() This power of attorney shall terminate on March 31, 2003 (insert a future date or event, such as court determination of your disability, when you want this power to terminate prior to your death)

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### **UNOFFICIAL COPY**

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

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 alor successor(s) to such agent:	ne and successively, in the order named) as
	. For purposes of this paragraph, a person
shall he considered to be incompetent if and wincompetent or disabled person or the person consideration to business matters, as certified by a	while the person is a minor or an adjudicated n is unable to give prompt and intelligent
(IF YOU WISH TO NAME YOUR AGENT AS EVENT A COURT DECIDES THAT ONE SHARE NOT REQUIRED TO, DO SO BY RET THE COURT WILL APPOINT YOUR AGE APPOINTMENT WILL STRVE YOUR BEST IP PARAGRAPH IF YOU DO NOT WANT YOUR	HOULD BE APPOINTED, YOU MAY, BUT AINING THE FOLLOWING PARAGRAPH. NT IF THE COURT FINDS THAT SUCH INTERESTS AND WELFARE. STRIKE OUT
If a guardian of my estate (my property) is to be this power of attorney as such guardian, a serve to all the contents of this form and understand the Signed  (Bringing)	without bond or security. I am fully informed as full import of this grant of powers to my agent.
(Principal)	4
(YOU MAY, BUT ARE NOT REQUIRED SUCCESSOR AGENTS TO PROVIDE SPE INCLUDE SPECIMEN SIGNATURES IN THE COMPLETE THE CERTIFICATION OPPOSITION.	CIMEN SIGNATURES BELOW. IF YOU IIS POWER OF ATTORNEY, YOU MUST
Specimen signatures of agent (and successors)	I certify that the signat was of my agent (and successors) are correct.
Petry (agent)	Maria & MEan 12 (principal)
(successor agent)	(principal)
(successor agent)	(principal)

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(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.) State of County of The undersigned, a notary public in and for the above county and state, certifies that marta D. Mc Canna 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 signa ure(s) of the agent(s)), Notary Public The undersigned witness certifies that Maria D. Mc Canna, known to me to be the same person whose name is subscripted 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 rue nory. (SEAL) Marqueste a Mulen Witness Dated: 277-03 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: 4 lotture 40. Wilmette. IL 60091

OFFICIAL SEAL
ROSE M KOPEC
37 ARY PUBLIC, 87 ATE OF 1LINOS
7 COMMISSION EXPRES:09/10/05

### **UNOFFICIAL COPY**

LEGAL DESCRIPTION - EXHIBIT A

Legal Description: Lot 15 in Block 6 in Seger's Subdivision of the Northeast 1/4 of the Northwest 1/4 of Fractional Section 33, Township 42 North, Range 13, East of the Third Principal Meridian in Cook County, Illinois.

Permanent Index #'s: 05-33-106-008-0000 Vol. 108

Property Address: 1942 Birchwood, Wilmette, Illinois 60091

Property of Cook County Clerk's Office

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