Doc#: 0326239055

Eugene "Gene" Moore Fee: \$28.00 Cook County Recorder of Deeds

Date: 09/19/2003 11:08 AM Pg: 1 of 3

MAIL TO: RESIDENTIAL TITLE SERVICES 1910 S. HIGHLAND AVE. SUITE 202 LOMBARD, IL 60148

LF205-04 R205-04

GENERAL POWER OF ATTORNEY

(With Durable Provision)

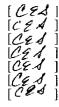
NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCU-MENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEUGL, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. YOU MAY SPECIFY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPAC TATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

TO ALL PERSONS, be it known that I, Charles & Sulek 9550 So HAMLIN AUE EVERGREEN PURK 1., 60805 the undersigned Grantor, do hereby make and grant a general power of attorn. yo Jan Sulek

of 9550 So HAMIN AVE EVERgreen Park 11, 60805 and do thereupon constitute and appoint said individual as my attorney-in-fact/agent.

My attorney-in-fact/agent shall act in my name, place and stead in any way which Lowself could do, if I were personally present, with respect to the following matters, to the extent that I am permitted by I aw to act through an agent:

(NOTICE: The grantor must write his or her initials in the corresponding blank space of a box below with respect to each of the subdivisions (A) through (O) below for which the Grantor wants to give the agent authority. If the blank space within a box for any particular subdivision is NOT initialed, NO AUTHORITY WILL BE GRANTED for matters that are included in that subdivision. Cross out each power withheld.)



- (A) Real estate transactions
- Tangible personal property transactions (B)
- (C) Bond, share and commodity transactions
- (D) Banking transactions
- (E) Business operating transactions
- (F) Insurance transactions
- Gifts to charities and individuals other than Attorney-in-Fact/Agent (If trust distributions are involved or tax consequences are anticipated, consult an attorney.)

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This product does not constitute the rendering of legal advice or services. This product is intended for informational use only and is not a substitute for legal advice. State laws vary, so consult an attorney on all legal matters. This product was not necessarily prepared by a person licensed to practice law in your state.

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UNOFFICIAL C



Claims and litigation

- Personal relationships and affairs **(I)**
- **(J)** Benefits from military service

(K) Records, reports and statements

Full and unqualified authority to my attorney-in-fact/agent to delegate any or all of the foregoing powers to any person or persons whom my attorney-in-fact/agent shall select

(M) Access to safe deposit box(es)

To authorize medical and surgical procedures (Pennsylvania only)

(O) All other matters

Durable Provision:

If the blank space in the block to the left is initialed by the Grantor, this power of attorney shall not be affected by the subsequent disability or incompetence of the Grantor.

Other Terms:

My attorney-in-fact/agent hereby accepts this appointment subject to its terms and agrees to act and perform in said fiduciary capacity consistent with my best interests as he/she in his/her best discretion deems advicat'e, and I affirm and ratify all acts so undertaken.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND TEAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HERFBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Signed under seal this . 20*03.* Signed in the presence of: Witness Attorney-in-Fact/Agent State of FILINDIS

County of Cook On AUGUST 19, 2003 before me,

, personally known

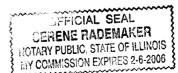
to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Known Type of ID Drivers

(Seal)

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EXHIBIT "A"

LOT 26, 27 AND 28 IN BLOCK 1 IN A.G. BRIGG'S AND COMPANY'S CRAWFORD GARDENS, BEING A SUBDIVISION OF THE NORTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 11, TOWNSHIP 37 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL ID NUMBER: 24-11-103-051-0000

COMMONLY KNOWN AS: 9550 SOUTH HAMLIN AVENUE

EVERGREEN PARK, IL 60805

Mail 10% countrywick House Coans Inc.

DECEMBER BY & COUNTRY ON CHILD ONDS

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VAN DAYS, CH CHILD ONDS