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1st AMERICAN TITLE order # 002224

Power of Attorney



Doc#: 0328911329  
Eugene "Gene" Moore Fee: \$34.00  
Cook County Recorder of Deeds  
Date: 10/16/2003 11:30 AM Pg: 1 of 6

**State of Illinois**

**County of Cook**

Legal Description and Property Address

See Attached

PIN #09-23-302-038-0000

After recording mail to: Andrew J. Mazzarella  
1107 N. Western Avenue  
Park Ridge, IL 60068

Property of Cook County Clerk's Office

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## 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 A POWER IS EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM. 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. 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.)

**POWER OF ATTORNEY** made this 19th day of January, 2002.

1. I, Andrew J. Mazzarella, 1107 N. Western, Park Ridge, Illinois 60068

(insert name and address of principal)

hereby appoint: my spouse, Christine M. Mazzarella, 1107 N. Western, Park Ridge, IL 60068

(insert name and 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 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 2 or 3 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 THROUGH THE TITLE OF THAT CATEGORY.)

- |   |   |  |
|---|---|--|
| a) Real estate transactions.                | f) Insurance and annuity transactions.                        | k) Commodity and option transactions.          |
| b) Financial institution transactions.      | g) Retirement plan transactions.                              | l) Business operations.                        |
| c) Stock and bond transactions.             | h) Social security, employment and military service benefits. | m) Borrowing transactions.                     |
| d) Tangible personal property transactions. | i) Tax matters.   | n) Estate transactions.                        |
| e) Safe deposit box transactions.           | j) Claims and litigation.                                     | o) 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.)

2. 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).

NO LIMITATIONS

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3. 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):

to transfer any of my property to the Andrew J. Mazzarella Trust dated January 19<sup>th</sup>, 2002., and to make gifts to my descendants to the extent of any unused annual gift tax exclusion available to me under federal law.

(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 POWER 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 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.)

5. 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 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 BOTH) OF THE FOLLOWING:)

6. This Power of Attorney shall become effective immediately, with respect to my spouse, and, with respect to my successor agent, upon my becoming incapacitated, but only during the period of incapacity. I shall be considered incapacitated (a) if and as long as I am adjudicated disabled because I am unable to manage my estate or financial matters, or (b) if a doctor familiar with my physical and mental condition and my spouse, Christine M. Mazzarella, if living and not disabled, certify to my agent in writing that I am unable to transact ordinary business, and until there is a like certification to my agent that such incapacity has ended. If my spouse is unwilling or unable to act, then my brother, Michael Mazzarella, of Scottsdale, Arizona, if living and not disabled, shall act together with such doctor for purposes of such certifications. If Michael is unwilling or unable to act, then my wife's cousin, Jerry Sasek, of Berwyn, Illinois, if living and not disabled, shall act together with such doctor for purposes of such certifications. If Jerry, is unwilling or unable to act, then my daughter, Kristen T. Mazzarella, of Kill Devil Hills, North Carolina, if living and not disabled, shall act together with such doctor for purposes of such certifications.

(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. This Power of Attorney shall terminate on \_\_\_\_\_ my death \_\_\_\_\_ .

(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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(IF YOU WISH TO NAME SUCCESSOR AGENTS, 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 legally disabled, resign or refuse to act, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

My brother, Michael Mazarella of Phoenix, Arizona; then my wife's cousin, Jerry Sasek, of Berwyn, Illinois; then my daughter, Kristen Mazarella, of Kill Devil Hills, North Carolina.

(IF YOU WISH TO NAME A GUARDIAN OF YOUR PERSON OR A GUARDIAN OF YOUR ESTATE, OR BOTH, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY INSERTING THE NAME(S) OF SUCH GUARDIAN(S) IN THE FOLLOWING PARAGRAPHS. THE COURT WILL APPOINT THE PERSON NOMINATED BY YOU IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. YOU MAY, BUT ARE NOT REQUIRED TO, NOMINATE AS YOUR GUARDIAN(S) THE SAME PERSON NAMED IN THIS FORM AS YOUR AGENT.)

9. If a guardian of my person is to be appointed, I nominate the following to serve as such guardian:

N/A

(Insert name and address of the nominated guardian of the person.)

10. If a guardian of my estate (my property) is to be appointed, I nominate the following to serve as such guardian:

The person then acting under this instrument.

(Insert name and address of nominated guardian of the estate.)

11. 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.

Signed:

Andrew J. Mazarella  
(Principal)

(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 successors)

I certify that the signatures of my agent (and successors) are correct.

Christine Mazarella  
(agent)

Andrew J. Mazarella  
(principal)

\_\_\_\_\_  
(successor agent)

\_\_\_\_\_  
(successor agent)

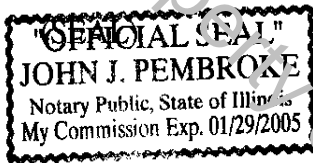
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(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)

State of ILLINOIS     )  
  )SS:  
County of COOK        )

The undersigned, a notary public in and for the above county and state, certifies that Andrew J. Mazzarella, known to me to be the same person whose name is subscribed as principal in the foregoing power of attorney, appeared before me 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.

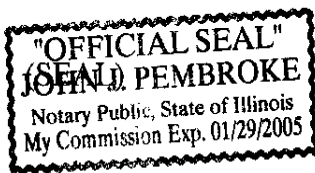
Dated: January 19<sup>th</sup>, 2002



Notary Public *John J. Pembroke*  
My commission expires *1-29-05*

THE UNDERSIGNED WITNESS CERTIFIES THAT ANDREW J. MAZZARELLA, 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 PURPOSES THEREIN SET FORTH. I BELIEVE HIM TO BE OF SOUND MIND AND MEMORY.

Dated: January 19<sup>th</sup>, 2002



Witness *May M. [Signature]*  
Notary Public *John J. Pembroke*  
My commission expires *1-29-05*

(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:

JOHN J. PEMBROKE, ATTORNEY AT LAW  
JOHN J. PEMBROKE & ASSOCIATES, P.C.  
422 N. NORTHWEST HWY. SUITE 150  
PARK RIDGE, IL 60068

*[Handwritten initials]*

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## LEGAL DESCRIPTION - EXHIBIT A

Legal Description: Lot 4 in Roman's Resubdivision of Lots 2, 3, 4, 5 and 6 in Dan Roman and Son's Resubdivision, being a resubdivision of Lots 9 through 19 in George Piraino's Subdivision of Section 23, Township 41 North, Range 12, East of the Third Principal Meridian, according to the Plat of said Roman's Resubdivision registered in the office of the Registrar of Titles of Cook County, Illinois on August 28, 1973 as Document No. 2713375, in Cook County, Illinois.

Permanent Index #'s: 09-23-302-038-0000 Vol 0092

Property Address: 1107 North Western Avenue, Park Ridge, Illinois 60068

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