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Power Of Attorney Property of Cook County Clerk's Office

Doc#: 0332226058

Eugene "Gene" Moore Fee: \$34.00 Cook County Recorder of Deeds

Date: 11/18/2003 10:31 AM Pg: 1 of 6

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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 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 YOLL 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 ITENDS 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.)

POWER OF ATTORNEY made this 29 day of October, 2003.

1. I, LYNNE A. GALANTE, of 648 W. Grace, Unit 1, Chicago, Illinois 60613, hereby appoint DANIEL L. GALANTE, of 648 W. Grace, Unit 1, Chicago, Illinois 60613, 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 "Statutery Short Form Power of Attorney for Property Law" (including all amendments), but subject to any limit ations 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.
- (b) Financial institution transactions.
- (c) Stock and bond transactions.
- (d) Tangible personal property transactions.
- (c) Safe deposit box transactions.

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- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (h) Social Security, employment, and military service benefits.
- (i) Tax matters.
- (j) Claims and litigation.
- (k) Commodity and option transactions.
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estate-transactions.
- (e) 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 agant]: The powers granted above are limited to granting my agent the power to execute and perform all of the terms, provisions, and conditions of any Sales Contract made by the undersigned, as Buyer, covering property commonly known as 1817 West Henderson, Chicago, IL 60657, hereby giving and granting unto my said attorney full power and authority to do and perform all and every act and thing whatso we requisite and necessary to be done in and about the premises, including all authority to date, execute and deliver such instruments and documents required by any title insurance company or Purchaser's mortgage lender. Said Property is legally described as follows:

SEE ATTACHED LEGAL DESCRIPTION

3. In addition to the powers granted above, I grant my agent the fellowing 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]: NONE.

(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 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 the power of attorney at the time of reference.

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(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 OF THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING ETTER (OR BOTH) OF THE FOLLOWING:)

- 6. (X) This power of attorney shall become effective on October 29, 2003 [insert a future date or event, such as court determination of your disability, when you want this power to first take effect].
- 7. (X) This power of atteracy shall terminate on the closing of the sale of the property commonly known as 1817 West Henderson. Chicago, IL 60657, and legally described above [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 SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOULOWING 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: **NONE**.

(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 OME 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: **NONE**.
- 10. If a guardian of my estate (my property) is to be appointed, I nominate the following to serve as such guardian: **NONE.**

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LOT 40 IN BLOCK IN PROFESARIA ADDITION TO CHICAGO, BEING A SUBDIVISION OF BLOCKS 39 ND 50 IN THE SUBDIVISION OF SECTION 19, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN (EXCEPT THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4 OF THE SOUTHEAST 1/4 OF THE SOUTHEAST 1/4 THEREOF) IN COOK COUNTY, ILLINOIS.

PERMANENT INDEX NUMBER: 14-19-421-013

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11. I am fully informed as to this grant of powers to pay agent.	all the contents of this f	form and understand the full import of
Signed: LYNNE A. GALAN	Halante	[principal]
State of Illinois) SS County of Cook)	/	
known to me (ab) the same person whose no before me and the additional witness in person voluntary act of the principal, for the uses an	ame is subscribed as principa son and acknowledged signing	d state, certifies that LYNNE A. GALANTE, I to the foregoing power of attorney, appeared g and delivering the instrument as the free and
Dated: 10-29-03 Notary Public	(SEAL)	OFFICIAL SEAL BONIFACE : ALEOCOO NOTARY PUBLIS STATE OF ILLINOIS MY COMMISSION EXPIRES: 02-07-07
is subscribed as principal to the foregoing pov	war of attorney, appeared before and voluntary act of the princ	nown to me to be the same person whose name re me and the notary public and acknowledged cipal, for the uses and purposes therein set forth.
Witness Witness	(SEAL)	
This document was prepared by: AND DFTEN NECONOING YO	Boniface F. Allocco ALLOCCO & MILLER 3409 North Paulina Street Chicago, Illinois 60657 (773) 868-4841	Clort's Office
		CO

Witness