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ATTORNEYS' TITLE GUARANTY FUND. INC



Doc#: 0334920029

Eugene "Gene" Moore Fee: \$32.00 Cook County Recorder of Deeds Date: 12/15/2003 07:29 AM Pg: 1 of 5

Illinois Offices: Champaign # Chicago # Flossmoot Libertyville . Lombard . Mt. Prospect North Riverside . Oak Lawn . Belleville 800.252.0402

> Virconsin Office: Madison 80 1.71 8.8989

st AMERICAN TITLE order# 1034316 (2t) 2083

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 POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEET 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 POWLS 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 34 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS TORM 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.)

ver of Attorney	made this	26th	day of	Noven	mber	200	13	
·	_	Day	, _	Mon	nth	Year	175.	
Randi J.	Littrell,	254	Woodvill	e Lane.	Schaumburg,	Illinoi	is 60193	
	<u> </u>			,			10 00 199	· · · · · · · · · · · · · · · · · · ·
					ddress of Principal			
		•		Name and Ad				g, IL 60193
		•		Name and Adtrell, 2	ddress of Principal			g, IL 60193

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:

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(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 f. Insurance and annuity transactions	g. Retirement plan transactions h. Social Security, employment, and military	Business operations Borrowing transactions State transactions All other property powers and transactions
(LIMITATIONS ON AND ADDITIONS TO THE THEY ARE SPECIFICALLY DESCRIBED	HE AGENT'S POWERS MAY BE INCLUDED BELOW.)	IN THIS POWER OF ATTORNEY
2. The powers granted above shall not include to you may include care specific limitations you real estate or special rates on borrowing by the	the following powers or shall be modified or lim deem appropriate, such as a prohibition or condi- te agent):	ited in the following particulars (here tions on the sale of particular stock or
All powers necessary to close	a mortgage loan on the property common	ıly known as 434 East
Beech Drive, Schauburg, IL 6	0193 and legally described herein, incl	uding the power to
sign mortgage loan documents :	and all other closing documents on my b	ehalf.
revoke or amend any trust specifically referre	Su to below	
PROPERLY EXERCISE THE POWERS GO DISCRETIONARY DECISIONS. IF YOU WE DECISION-MAKING POWERS TO OTHER STRUCK OUT.) 4. My agent shall have the right by written ins making to any person or persons whom r	TO EMPLOY OTHER PERSONS AS NECESS RANTED IN THIS FORM, BUT YOUR AGINT TO GIVE YOUR AGENT THE LIGHT RS, YOU SHOULD KEEP THE NEXT SENTE STRUMENT TO delegate any or all of the foregoing puny agent may select, but such delegation may	ENT WILL HAVE TO MAKE ALL TO DELEGATE DISCRETIONARY NCE, OTHERWISE IT SHOULD BE owers involving discretionary decision- be amenged or revoked by any agent
(including any successor) named by me who (YOUR AGENT WILL BE ENTITLED TO I UNDER THIS POWER OF ATTORNEY. S'	REIMBURSEMENT FOR ALL REASONABLE TRIKE OUT THE NEXT SENTENCE IF YOU COMPENSATION FOR SERVICES AS AGENT	e of reference. EXPENSES INCURRED IN ACTING DO NOT WANT YOUR AGENT TO
	npensation for services rendered as agent under t	,

(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

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BOTH) OF THE FOLLOWING:)

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5This power of attorney shall become effective on	November 26, 2003
Initial	
(Insert a future date or event during your lifetime, such as court a	determination of your disability, when you want this power to first take effect.)
7This power of attorney shall terminate onDec	ember 15, 2003
(Insert a future date or event, such as court determination of y	our disability, when you want this power to terminate prior to your death.)
(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE FOLLOWING PARAGRAPH.)	THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN
8. If any agent named by me shall die, become incompetent, re	esign or refuse to accept the office of agent, I name the following (each
to act alone and successively, in the order named) as success	sor(s) to such agent:
n/a	
a licensed physician.	I to be incompetent if and while the person is a minor or an adjudicated prompt and intelligent consideration to business matters, as certified by
ONE SHOULD BE APPOINTED, YOU M/Y, BUT ARE PARAGRAPH. THE COURT WILL APPOINT YOUR AG	N OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING ENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL IKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT
9. If a guardian of my estate (my property) is to be appoint guardian, to serve without bond or security.	te . I nominate the agent acting under this power of attorney as such
10. 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.
Fand Statuell Signature of Principal Randi	J. Littrell
(YOU MAY, BUT ARE NOT REQUIRED TO, REQUI	EST YOUR AGENT AND JUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU
Specimen signatures of agent (and successors):	I certify that the signatures of ray agent (and successors) are correct.
Agent	Principal
Successor Agent	Principal
Successor Agent	Principal

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

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STATE OF	
COUNTY OF Cook) SS	
The undersigned, a notary public in and for the above county and known to me to be the same person whose name is subscribed as I the additional witness in person and acknowledged signing and de for the uses and purposes therein set forth, and certified to the con-	principal to the foregoing power of attorney, appeared before me and elivering the instrument as the free and voluntary act of the principal.
Total 44 /05 /07	()
Dated: 11/26/03	Notary Public
"OFFICIAL SEAL" ROSEMARIE SETTANNI NOTALY PIBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES 8/10/2007	My commission expires 08/10/07 Date
The undersigned wing as certifies that Randi Littrell name is subscribed as propipal to the foregoing power of atto signing and delivering the incurrent as the free and voluntary ac	, known to me to be the same person whose rney, appeared before me and the notary public and acknowledged tof the principal, for the uses and nurposes therein set forth. I believe
him or her to be of sound min 1 and memory.	
Dated: 11/26/03	Lanes West
	Witness
(THE NAME AND ADDRESS OF THE PERSON PEPARIN HAVE POWER TO CONVEY ANY INTEREST IN REAL EST	NG THIS FORM SHOULD BE INSERTED IF THE AGENT WILL CATE.)
This document was prepared by: Guthrie & Brady, 10' u Mail to.	S. Roselle Road, Schaumburg, IL 60193
The requirement of the signature of an additional witness impose instruments executed on or after the effective date of June 9, 200	ed by the americatory Act of the 91st General Assembly applies only to 00. (P.A. 86- '36.)
	C/T/S OFFICE

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LEGAL DESCRIPTION - EXHIBIT A

Legal Description: Lot 10 in Block 8 of Lexington Village Unit 2, a Subdivision of part of the Southwest 1/4 of Section 23, Township 41 North, Range 10 East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Index #'s: 07-23-310-010-0000 Vol 0187

Property Address: 434 East Beech Drive, Schaumburg, Illinois 60193

Property of Country Clark's Office