UNOFFICIAL COPY

Doc#: 0401527139

Eugene "Gene" Moore Fee: \$30.50

Cook County Recorder of Deeds

Date: 01/15/2004 01:02 PM Pg: 1 of 4

COVER SHEET FOR RECORDING DOCUMENT

POWER OF ATTORNEY

MAIL TO:

NAME AND ADDRESS OF PREPARER:

OLGAR E. PAGAN

1301 HIGGINS RD.

SIX GROVE YILLAGE IL 60007

O) 05 4670

PARK RIDGE, IL

60068

PIN: 13-11-216-02-7

Recorded by Chicago as a second inco $i\lambda$

0401527139 Page: 2 of 4

"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 KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF THIS FORM SUT NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT COAGENTS. 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 31. day of Dec (month) 2003 (year) 1.1, Oiga E Pagan (insert name and address of principal)
1.I. Ovaa E Pagan , (insert name and address of principal)
hereby appoint Delaguardia 2031 N Parkside Park Ridge IL 60068
(insert name and addless of agent) as my attorney-in-fact (ray "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: (a) Real estate transactions.
(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S PC WER: 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):
N/A
1.0
N/A
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):
NA

(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 CIVE YOUR AGENT THE RIGHT TO DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHERS, YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWSE IT SHOULD BE STRUCK OUT.)

UNOFFICIAL COPY

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:)

(successor agent)	(principal)
(agent)	(principal)
(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOU SIGNATURES BELOW. IF YOU INCLUDE SPECIMEN SIGNATURES OF THE ACTION OPPOSITE THE SIGNATURES OPPOSITE THE SIGNATURE OPPOSITE THE SIGNATURES OPPOSITE THE SIGNATURE OPP	UR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN NATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE GENTS.) ESSORS) I certify that the signatures of my agent (and
Signed Olga E Pagan	
this grant of powers to my agent.	0.
10.I am fully informed as to all the conte	nts of this form and unders and the full import of
under this power of attorney as such guar	rdian, to serve without bond or security.
PARAGRAPH, THE COURT WILL APPOINT YOUR AGENT DESCRIPTION OF AND WELFARE STRIKE OUT PARAGRA	if the court finds that such appointment will serve your APH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.) is to be appointed, I nominate the agent acting
THE PROPERTY OF THE OWNER OF THE PROPERTY OF T	R AGENT AS GUARLIAN OF YOUR ESTATE, IN THE EVENT A COURT BUT ARE NOT RECUIPED TO, DO SO BY RETAINING THE FOLLOWING BUT ARE ON DIT FOR THAT SHOULA PRODUCTION WILL SERVE YOUR
unable to give prompt and intelligent con	sideration to business matters, as certified by a
the person is a minor or an adjudicated in	competent or disabled person or the person is
For purposes of this paragraph 8, a person	n (hall be considered to be incompetent if and while
N/A	
as successor(s) to such agent:	
	h to act alone and successively, in the order named)
& If any agent named by me shall die, bec	come incompetent, resign or refuse to accept the
(IF YOU WISH TO NAME SUCCE SOR AGENTS, INSERT THE FOLLOWING PARAGRAPH)	HE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE
terminate prior to your desch	
Januari, 31, 2004	ination of your disability, when you want this power to
7.() This po we; of attorney shall terminat	e on
this power to first take effect)	
(insert a frome date or event during your lifetime,	such as court determination of your disability, when you want
6.() This power of attorney shall become January 1, 2004	
	CC (1) OF THE FOLLOWING:)

	_		_	_	_	
(THIS POWER OF ATTOR						
) 			1DV	
	J.I.N 认	e er reer	THE THE COURT	JUST A DOZEM	CONTRACTOR FOR MIRELO	w
THIS POWER OF ATTER	NEY WILL	5 1 ₽₽ 1:1/ - EC 11	VI: 11.150 11 10	AKLES, C	O TIL I O MI DELO	***

State of
The undersigned, a notary public in and for the above county and state, certifies that Olga E. Lagara, known to me to be the same person whose name is subscribed as principal to 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 (, and certified to the correctness of the signature(s) of the agent(s)). Dated: 12-131 103 (SEAL) MARC NAKISHER NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION IN ORDERS 6/26/2005 My commission expires 2. 26. 25 My commission expires 2. 26. 25
The undersigned witness certifies that UCA K PAGAV known to me to be the same person whose name is subscribed as prinicipal to the foregoing power of attorney, appeared before me and an 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 memory.
Dated: 12/31/13
(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:
NAME OLGA E PAGAN
ADDRESS 2001 N. PARKSIDE CITY, STATE PARK RIDGE //
ZIP 60068 THE ABOVE SPACE FOR RECORDERS USE ONLY
LOT 33 AND THE SOUTH 1/2 OF LOT 34 IN BLOCK & IN NORTH FAR ADDITION TO CHICAGO, A SUBDIVISION OF PART OF THE PORTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 11, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK LOUNTY, ILLINOIS
STREET ADDRESS: 5320 N. Sawyer, Chicago, IL 60625 PERMANENT TAX INDEX NUMBER: 13-11-216-027
PERMANENT TAX INDEX NUMBER: 13 11 ALB VAL