12/12/2003 11:27 FAX 84 JON'S FECT BAND ATORNY PY

ATTORNEYS'
TITLE
GUARANTY
FUND,
INC.

Doc#: 0402842282
Eugene "Gene" Moore Fee: \$32.00
Cook County Recorder of Deeds
Date: 01/28/2004 11:23 AM Pg: 1 of 5

Illinois Offices:
Champaign * Chicago * Homewood
Libertyville * Lombard * Mt. Prospert
North Riverside * Oak Lawn * Belleville
8 02:52:0:402

Wiscrusin Office Ma (iso) 800.788.5 /89

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

5 BMR

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR I ROPERTY, 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 RECURD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE FOWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY, YOU MAY NAME SUCCESSOR AGENTS UNLESS 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 ILLINO'S "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 ANK A LAWYER TO EXPLAIN IT TO YOU.)

Day day of Month Year	0/50
Richard Chirico	/C
242 Springvalley Way, Aston, PA 10014	
Name and Address of Principal hereby appoint: Scott Z. Berman	
9816 N. Keeler, Skokie, IL 60076 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:

21 202 / Des / Des / Des / Des / Des / Des

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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 Financial institution transactions Stock and bond transactions d. Tangible personal property transactions Safe deposit box transactions Insurance and annuity transactions	Business operations h. Social Security, employment, and military service benefits i. Tax matters j. Claims and litigation k. Commodity and option transactions
(LIMITATIONS ON AND ADDITIONS TO IF THEY ARE SPECIFICALLY DESCRIBE	THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY D BELOW.)
real estate or special rules in horrowing by The execution of any ar	nd all documents relative to the purchase of
that certain property	commonly known as 6444 N. Glenwood, #1. Chicago II
and the execution of 21	y and all documents for the borrowing of funds
for the purchase of sai	d property.
 In addition to the powers granted above, I including, without limitation, power to make revoke or amend any trust specifically referring None 	grant my age it the following powers (here you may add any other delegable powers gifts, exercine powers of appointment, name or change beneficiaries or joint tenants or ed to below):
	9
\ \tag{\frac{1}{2}}	
	TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO ANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL

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 DEI EGATE 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 reversal 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:)

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6. RC This power of attorney shall become effective on	12/12/03
(Insert a future dute or event during your lifetime such	
	termination of your disability, when you want this power to first take effect.)
7. RC This power of attorney shall terminate on	02/01/04
(insert a future date or event, such as court determination of you	ur disability, when you want this power to terminute prior to your death.)
	ar assumily, when you want this power to terminute prior to your death.)
(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE FOLLOWING FARAGRAPH.)	THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN
8. If any agent named by the shall dic, become incompetent, resi	gn or refuse to accept the office of agent, I name the following (each
to act alone and successively in the order named) as successor	(s) to such agent:
For purposes of this paragraph 8, a person shall be considered to incompetent or disabled person or the pen on is unable to give pro a licensed physician.	be incompetent if and while the person is a minor or an adjudicated ompt and intelligent consideration to business matters, as certified by
PARAGRAPH. THE COURT WILL APPOINT YOUR ACEN SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE TO ACT AS GUARDIAN.)	OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT T REQUIRED TO, DO SO BY RETAINING THE FOLLOWING I IF THE COURT FINDS THAT SUCH APPOINTMENT WILL OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT
 If a guardian of my estate (my property) is to be appointed, guardian, to serve without bond or security. 	I numirate the agent acting under this power of attorney as such
10. I am fully informed as to all the contents of this form and unde	estand the full import of this group of the
Richard Chirico	and the state of powers to my agent.
* Vuchos Signature of Principal	
(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST SPECIMEN SIGNATURES BELOW, IF YOU INCLUDE SPECIMENT COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURE.	YOUR AGENT AND SUCCESS D. AGENTS TO PROVIDE IMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU INATURES OF THE AGENTS.)
Specimen signatures of agent (and successors):	I certify that the signatures of my agent (and successors) are correct.
Ann	
Agent	Principal
Successor Agent	
	Principal
Successor Agent	Principal
	i i melbat

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

ATG FORM 4003 Ø ATG (REV 8/02)

12/12/2003 11:28 FAX 817 NO FFICT ARIAN ATOMEY PY

2005

STATE OF Mensio			
COUNTY OF COOK SS			
The undersigned, a notary public in and for the above county anknown to me to be the same person whose name is subscribed a the additional witness in person and acknowledged signing and for the uses and purposes therein set forth, and certified to the co	s principal to the foregoing power of attorney, appeared before me and		
Dated: December 12, 2003	** Danielle & Thomas		
OFFICIAL SEAL DANIELLE A THOMAS NOTARY PUBLIC - STATE OF ILLINOIS MY CURANSSION EXPIRES: 07-10-07	My commission expires 7-10-07		
The undersigned witness articles that Richard Chiriname is subscribed as principal to the foregoing power of attestigning and delivering the instrument of the free and voluntary achim or her to be of sound mind and memory.	rate.		
Deted: 12/12/2003	*** Em Lagets		
(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: Scott Z. Berma	n, Attorney at Law		
9816 N. Keeler, Skokie, IL 60076	(84/) 329-7272		
The requirement of the signature of an additional witness imposed by the amendatory Act of the 91st General Assembly applies only to instruments executed on or after the effective date of June 9, 2000. (P.A. 86-736.)			
	TSOFFICE		

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STREET ADDRESS: 6444 N. GLENWOOD FICIAL COPY

CITY: CHICAGO

COUNTY: COOK

TAX NUMBER: 11-32-327-033-1003

LEGAL DESCRIPTION:

UNIT 6444-1 AND PARKING SPACE P-9 IN THE PARK GLENWOOD CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED TRACT OF LAND:

CERTAIN LOT SOR PARTS THEREOF IN LOTS 1, 2, AND 3 IN SICKINGER'S SUBDIVISION OF LOTS 7 AND 8 IN SUBDIVISION BY L.C. PAINE FREER (RECEIVER) OF THE WES 1/2 OF THE SOUTHWEST 1/4 OF SECTION 32, TOWNSHIP 41 NORTH, RANGE 4, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

WHICH SURVEY IS ATTACHED AS AN EXHIBIT TO THE DECLARATION OF CONDOMINIUM RECORDED AS ODE TOURS OFFICE DOCUMENT NUMBER 09088190; TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN COO! COUNTY ILLINOIS.