TICOR TITLE INSURANCE

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Doc#: 0404126224

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

Date: 02/10/2004 02:24 PM Pg: 1 of 6

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 POWF'S A RE 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 COULT 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 TEL MINATES IT, YOUR

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

AGENT MAY EXERCISE THE POWERS GIVEN HERE

ATTORNEY FOR PROPERTY LAW" OF WHICH

(ABOVE SPACE FOR RECORDER'S USE) THIS FORM IS A PART (REPRINTED IMMEDIATELY FOLLOV IN 3 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 6th Charles H. Hurford 4719 N. S. (insert name and address of principal)

hereby appoint: Michael Murler

(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.
- Financial institution transactions. (b)

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Stock and bond transactions.

(c)

(d) ·	Tangible personal property transactions.
(e)	Safe deposit box transactions.
(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.
(o)	All other property powers and transactions.
	ATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY ARE SPECIFICALLY DESCRIBED BELOW.)
approp	2. The powers granted above shall not include the following powers or shall be modified ted in the following particulars (here you may include any specific limitations you deem riate, such as a prohibition or conditions on the sale of particular stock or real estate or special n borrowing by the agent):
The no	wers granted above are hereby granted only in connection with, and are only to be exercised
	e sale of the real estate and personal property is cated at 4717 N. Springful
	ne payment of any loans, trust deeds, mortgages uens, costs and expenses related thereto.
1 11111111	10 paymont of any found, a act does, mortgages, in its, costs and expenses related mereto.
	3. In addition to the powers granted above, I grant my agent the following powers (here
vou ma	y add any other delegable powers including, without limitation, rewer to make gifts, exercise
	s of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust
	cally referred to below):
openin	oung reserved to below).
	(a) To take all acts and execute and deliver all documents, including, without limitation, a
	contract, a Deed,
	in connection with the sale of, Illinois with the
	legal description set forth on an attached page;
	1-8an accomplication on an attached page,
	(b) Other Compensation. To compensate separately any brokers, attorneys, auditors, depositories, real estate managers, investment advisors and other persons (including my agent and any firm with which my agent is associated without reducing compensation in any capacity).

0404126224 Page: 3 of 6

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(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.)

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				sona	able	com	ipens	sation	ı for	serv	vices	renc	lered	as.	agent
under this po	ower of attorney.	•	•	 -	٠	٠		Î		٠						U

(THIS POWER OF ATTORNEY MAY PE 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 UNLES A LIMITATION ON THE BEGINNING DATE O'S DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OI BOTH) OF THE FOLLOWING:)
6. () This power of attorney snall become effective on
(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
7.6
(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 FOLLOWING PARAGRAPH.)
•

If any agent named by me shall die, become incompetent, resign 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 be incompetent if and while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give

0404126224 Page: 4 of 6

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prompt and intelligent consideration to business matters, as certified by a licensed physician.

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.

- 9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.
- 10. I am fully informed as to all the contents of this form and understand the full impact of this grant of powers to my agent.

·	9	Signed	hailes	X X/n	was	
	Ox	,		(Principal)		
YOU MAY, BUT ARE NOT SPECIMEN SIGNATURES BE MUST COMPLETE THE CER	LOW. IF YOU IN CI	LUDE SPECIMEN SIC	INATURES IN	THIS POWER	GENTS TO PRO OF ATTORNEY,	VIDE YOU
Specimen signature of a	gent	I certify tha	t the signat	ure(s)		
(and successors)	5			essor) are co	rrect.	
Michael HM (Agent)		<u>Char</u> (Pri	Us 7/ ncipal	Huy 24'	tor	
(Successor Agen	t)	———(Pr	incipal)	0		
					in a second	
(Successor Agen	t)	(Pri	ncipal) ·	;	C	
(THIS POWER OF ATTORNE' ADDITIONAL WITNESS, US			r is notariz	ED AND SIGNE	ED BY AT LEAST	ΓON
State of Illinois)) S	S.		,		

County of ____

0404126224 Page: 5 of 6

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principal to the foregoing power of attorney, a and acknowledged signing and delivering the	nd for the above county and state, certifies that e to be the same person whose name is subscribed as appeared before me and the additional witness in person instrument as the free and voluntary act of the principal and certified to the correctness of the signature(s) of the
Dated: 06-06-03, 2003	OFFICIAL SEAL MICHAEL H FACTOR NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 11/03/05
(SEAL)	My Commission expires:
the and the notary public and acknowledge?	known to be to be the same I to the foregoing power of attorney, appeared before signing and delivering the instrument as the free and I purposes therein set forth. I believe him or her to be
Dated:, 2003	Delcie f-Hurford Witness
THE NAME AND ADDRESS OF THE PERSON PREPAR	UNG THIS FORM SHOULD BE INSERTED IF THE AGENT WILL

HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE.)

LEGAL DESCRIPTION For The Property Commonly Known As 4717 North Springfield, Chicago, IL

LOT 30 IN BLOCK 2 IN TRYON AND DAVIS' 40TH AVENUE ADDITION TO IRVING PARK IN THE NORTH 1/2 OF THE NORTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 14, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL The KCO. MERIDIAN, IN COOK COUNTY, ILLINOIS.