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Doc#: 0413127045 Fugene "Gene" Moore Fee: \$54.0

ILLINOIS STATUTORY SHORT FORM
POWER OF ATTORNEY FOR PROPERTY

Eugene "Gene" Moore Fee: \$54.00 Cook County Recorder of Deeds Date: 05/10/2004 11:21 AM Pg: 1 of 4

PRAIRIE TITLE 6821 W NORTH AVE. OAK PARK, IL 60302

0403-08785

1. Robert F. Schildgen (insert name and address of principal) hereby appoint: Catherine E. Danz, 333 West Wacker, Suite 2100, Chicago Illinois 60606 (insert name and address of agent) as it 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:

- (a) Real estate transactions.
- (b) Lax matters.
- (c) All other property powers and transactions.
- In addition to the oovers granted above, I grant my agent the following powers (here you may add or change any 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): Any and all powers necessary with the acquisition of 2150 West Addison, Chicago, Illinois.
- 3. (X) This power of attorney shall be effective from the date of execution of this form through June 1, 2004 (insert a future date or event during your lifetime, such as court termination of your disability, when you vary this power to first take effect).
- 4. (X) This power of attorney shall terminate on Jurie 1, 2004.
- 5. If any agent named by me shall die, become incompetent resign or refuse to accept the offer of agent, I name the following (each to act along an i successively, in the order named) as successor(s) to such agent: NONE, AGENCY Shay I. TERMINATE

For purposes of this paragraph 5, a person shall be considered to be incompetent if any while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration in business matters, as certified by a licensed physician.

- 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 a to all the contents of this form and understand the full import of this grant of powers of my agent.

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í	Signed (Principal)	Jehlh S	
Specimen signatures of agent (and successors)		I certify that the signatures of my agent (and successors) are correct.	
<u>4/16/0</u> 4 Date	(Principal)	Date Date	
Date	(Principal)	Date	
00/	County		
		T'S OFFICE	
	successors) 4/16/04 Date	Signed: (Principal) Successors) I certify that the signal successors) are correct that the signal successors are correct than the signal successors are correct than the signal successors are correct to the signal succ	

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State of Illinois } }SS.	
County of (only)	a , Faril
The undersigned, in and for the above county and state, certif	ies that Robert Schildgen
Known to me to be the same person whose name is subscribe attorney, appeared before me in person and acknowledged sig free and voluntary act of the principal, for the uses and purpo correctness of the signature(s) of the agent(s).	d as principal to the foregoing power of gning and delivering the instrument as the
Dated: 4/16/04	Autumn Bechlew
My commission expire:	Millinger Decree
OFFICIAL SCAL AUTUMN BECHUER NOTARY PUBLIC STALE OF SOURCE MY COMMISSIONE OF SOURCE MY COM	ary Public

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A POLICY ISSUING AGENT OF FIDELITY NATIONAL TITLE INSURANCE COMPANY

COMMITMENT NO. 0403-08785

schedule A (continued)

LEGAL DESCRIPTION

LOT 25 (EXCEPT THE EAST 18 FEET THEREOF) AND LOT 26 IN FREDERICK A. OSWALD'S SUBDIVISION OF THE WEST 1/2 OF BLOCK 4, IN SELLER'S SUBDIVISION OF THE SOUTHEAST 1/4 OF THE NORTHWEST ON WINS. DIS OFFICE OF COUNTY CIENTS OFFICE 1/4 OF SECTION 19 TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

VALID ONLY IF SCHEDULE B AND COVER ARE ATTACHED