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ATTORNEYS' TITLE Guaranty Fund, Inc.



Doc#: 0425829013 Eugene "Gene" Moore Fee: \$32.00 Cook County Recorder of Deeds Date: 09/14/2004 08:44 AM Pg: 1 of 5

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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 PLOPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSUNAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE /, 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 RECOPD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE JOWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY, YOU MAY NAME SUCCESSOR AGENTS 'JN'DER 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 BE OMF DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINGIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART (SEE THE PACK OF THIS FORM). THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTOL YEAR YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ACK A LAWYER TO EXPLAIN IT TO YOU.)

| Power of Attorney | made this 16th Day | day of August | , 2004 Year | Office | |
|--------------------|--------------------|---------------|----------------------------|------------|-------------|
| 1.1, <u>Estell</u> | a Varela- | 5950 S. | Kildare, O | Inicage Di | 6429 |
| hereby appoint: | Keynaldu | Varely - 59 | of Principal 50 S. Milc | are, Chica | yo Il Colle |

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:

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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 |
|----|---|
| þ. | Financial institution transactions |
| ₫. | Stock and bond transactions |
| i. | Tangible personal property transactions |
| è. | Safe deposit box transactions |

Insurance and annuity transactions

Retirement plan transactions
 Social Security, employment, and military service benefits
 Tax matters
 Claims and litigation

Commodity and option transactions

business operationsBorrowing transactionsEstate transactionsAll other property powers and

transactions

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

| 2. | The powers granted too e shall not include the following powers or shall be modified or limited in the following particulars (here |
|----|--|
| | you may include any sp. cif c 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): |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| 2 | In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers |
| ٥. | including, without limitation, power to make gifts, exerci e powers of appointment, name or change beneficiaries or joint tenants or |
| | |
| | revoke or amend any trust specifically referred to below): |
| | |
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| | |

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECLSSARY 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.)

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:)

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| 6x EV This power of attorney shall become effective on August 16, 2004 |
|--|
| (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 EV This power of attorney shall terminate on August 30, 300 4 |
| (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) I THE FOLLOWING PARAGRAPH.) |
| 8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I name the following (eac |
| 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 adjudicate incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified be 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. STUKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENTO ACT AS GUARDIAN.) |
| 9. If a guardian of my estate (my property) is to be appointed, it mordinate the agent acting under this power of attorney as successful, to serve without bond or security. |
| 0. 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. |
| Istelle Vacala Signature of Principal |
| YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSON AGENTS TO PROVIDE SPECIMEN SIGNATURES IN THIS POWE'S OF ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.) |
| pecimen signatures of agent (and successors): 1 certify that the signatures of my 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 PLINOIS STATE OF PLINOIS STATE OF PLINOIS |
| COUNTY OF |
| The undersigned, a notary public in and for the above county and state, certifies that known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the additional witness 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: 8-16-04 May her |
| "OFFICIAL SEAL" (SILEM) NERY N) tary Public, State of Illinois N) tary Public, State of Illinois My Cermilission Expires August 21, 2005 My Cermilission Expires August 21, 2005 Date |
| The undersigned witness certifies that , known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the 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 |
| film of her to be of sound mind and the nory. |
| Dated: 8-16-04 Or Bacio Urile |
| (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:

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Property of Cook County Clerk's Office

Step 3: Write the legal description from the deed. Write, type (minimum 10-point font required), or attach the legal description from the deed. If you prefer, submit an 8½" x 11" copy of the extended legal description with this form. You may also use the space below to write additional parcel identifiers and lots sizes or acreage from Step 1, Line 3.

Lot 27 in Block 3 in A.T. McIntosh's 63rd Street Addition, being a Subdivision of the West 1/2 of the Southeast 1/4 of Section 15, Township 38 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.