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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 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. COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE YOU MAY NAME SUCCESSOR AGENT IS NOT ACTING PROPERLY. 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 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 END OF THIS FORM). 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 277 day of SEPTEMBER 2004

I, PERCY TOMPKINS and KAREN TOMPKINS, of 18443 RIVER ROAD Hazel Crest, Illinois 60429 hereby appoint my attorney, LINNAE MISE BRYANT of 200 South Wacker Drive, Chicago, Illinois as my attorney-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with aspect 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 TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)



Doc#: 0430135138 Eugene "Gene" Moore Fee: \$58.00 Cook County Recorder of Deeds Date: 10/27/2004 11:30 AM Pg: 1 of 5

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a. Real estate transactions.

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b. Tangible personal property transactions.

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

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 apont.

THIS POWER IS LIMITED TO TRANSACTIONS INVOLVING THE SALE OF PROPERTY AT 1347 182ND PLACE, COUNTRY CLUB HILLS, ILLINOIS and 18000 GRANDVIEW TERRACE, COUNTY CLUB HILLS, ILLINOIS.

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 rovoke or amend any trust specifically referred to below):

NONE .
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- 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.
- 5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney. Said compensation to be payable as part of the closing services at the time of closing.

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(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:)

- 6. (X) This power of attorney shall become effective on September 27, 2004.
- 7. () This power of attorney shall terminate on October 31, 2004.

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN 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 (each to act alone and successively, in the order named) as successor(s) to such agent:

NONE	ITO I Va		
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For purposes of this paragraph 8, a rerson 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 prompt and intelligent consideration to business matters, as certified by a licensed physician. 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.

9. 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.

Signed ___

PERCY TOMPKINS JR. (principal)

Signaria

KAREN TOMPKIŃS

(principal)

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

STATE OF ILLINOIS

COUNTY OF COOK

The undersigned, a notary public in and for the above county and state, certifies that PERCY TOMPKINS JR. and KAREN TOMPKINS, known to me to be the same person whose name is subscribed as principals 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 principals, for the uses and purposes therein sat forth

Dated:

(SEAL

Notary Public

My commission expires

The undersigned witness certifies the PERCY TOMPKINS and KAREN TOMPKINS, known to me to be the same persons whose names are subscribed as principals 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 principals, for the uses and purposes therein sot forth. I believe him or her to be of sound mind and memory

Datèd:

WITNESS

(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.)

MAIL

This document was prepared by:

LINNAE WISE BRYANT

ATTORNEY AT LAW

200 SOUTH WACKER DRIVE, SUITE 3100

CHICAGO, ILLINOIS 60606

312-750-0949

ATTORNEY NO. 19758

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STREET ADDRESS: 4347 182ND PLACE

CITY: COUNTRY CLUB HILLS COUNTY: COOK

TAX NUMBER: 28-34-421-006-0000

LEGAL DESCRIPTION:

LOT 28 IN BLOCK 4 TOGETHER WITH THE NORTH 1/2 OF THE VACATED ALLEY LYING SOUTH AND ADJOINING SAID LOT, ALL IN FLOSSMOOR TERRACE, BEING A SUBDIVISION OF PART OF THE SOUTH EAST 1/4 OF SECTION 34, TOWNSHIP 36 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS