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Doc#: 0431344045 Eugene "Gene" Moore Fee: \$50.00

Cook County Recorder of Deeds Date: 11/08/2004 11:34 AM Pg: 1 of 3

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

I	POWER OF ATTORNEY made this 26 th day of October (month) 2004 (year).
I I	Aurora II 60504
e• (Carlos M. Rodriguez, Attorney, of 55 W 22 nd Street, Suite 109, Lombard, IL 60148 (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 or below: (a) Real estate transactions. (b) Financial institution transactions.
	(d) Tangible personal property transactions. (e) Safe deposit box transactions. (f) Insurance and annuity transactions. (g) Retirement plan transactions. (h) Social Security, employment and minimary service benefits.
	(e) Safe deposit box transactions.
	(f) Insurance and annuity transactions.
	(g) Retirement plan transactions.
	(i) Tax matters. (i) Claims and litigation.
·	(j) Claims and litigation. (k) Commodity and option transactions.
Č	(l) Business operations.
	(m) Borrowing transactions.
	(n) Estate transactions.
\circ	(o) All other property powers and transactions.
* 1	A such all he modified or limited in the
	The powers granted above shall not include the following powers or shall be modified or limited in the
7	following particulars (here you may include any specific limitation; you deem appropriate, such as a
-	prohibition or conditions on the sale of particular stock or real estate or special rules on borrowing by
- A - A - A - A - A - A - A - A - A - A	the agent):
	None
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Frank	
and the same	

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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 revoke or amend any trust specifically referred to below):

Any and all powers necessary to secure a mortgage for and purchase the property commonly	у
known as 636 West Waveland, Unit 1E, Chicago, Cook County IL 60613 PIN 14-21-106-036-1018	
My agent shall have the right by written instrument to delegate any or all of the foregoing powers involvi discretionar, decision-making to any person or persons whom my agent may select, but such delegation may amended or revoked by any agent (including any successor) named by me who is acting under this power attorney at the time of reference.	of
My agent shall be entirled to reasonable compensation for services rendered as agent under this power	ot
attorney. This power of attorney shall become effective on October 27, 2004 (insert a future date or event during your lifetime, such as court determination of your disability, when you was	ant
this power to first take effect).	uii.
This power of attorney shall terming con October 29, 2004 at 5pm	
(insert a future date or event, such as court determination of your disability, when you want this power terminate prior to your death).	
If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I nathe following (each to act alone and successively, in the order named) as successor(s) to such agent:	
For purposes of this paragraph, a person	n
shall be considered to be incompetent if and while the person is a mirror or an adjudicated incompetent disabled person or the person is unable to give prompt and intelligent consideration to business matters, certified by a licensed physician.	, as
If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power attorney as such guardian, to serve without bond or security. I am fully informed as to all the contents of form and understand the full import of this grant of powers to my agent.	r of this
Signed Staciel Kinathow Signed (Principal)	

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Specimen signatures of agent (and successors)		I certify that the signature agent (and successors) are	
Colife Taly 6	(agent) (successor agent)	Storie Lavead	(principal)
State of Illinois. County of Du Page	_ `		
The undersigned, a notary public in a Stacie Kwiatkowski name is subscribed as rarcipal to witness in person and acknowledged principal, for the uses and purpoles agent(s)). Dated: Oct. 26,2004 (SE	the foregoing power of signing and delivering therein set forth, (and co	known to me to be the attorney, appeared before rethe instrument as the free an ertified to the correctness of	ne and the additional d voluntary act of the
The undersigned witness certifies that the same person whose name is substand the notary public and acknowled the principal, for the uses and purpost Dated: 10-26-64 (SE	scribed as principal to the	e foregoing power of attorneing the instrument as the fre	e and voluntary act of
This document was prepared by: Carlos M Rodriguez, PC 55 W 22 nd Street, Suite 109 Lombard, IL 60148-4801		750	