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POWER OF ATTORNEY FOR PROPERTY (Illinois)

CAUTION: Consult a lawyer before using Or acting under this form. All warranties, Including merchantability and fitness are Excluded.

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY.



0434902316

Doc#: 0434902316 Eugene "Gene" Moore Fee: \$58.00 Cook County Recorder of Deeds Date: 12/14/2004 10:07 AM Pg: 1 of 5

Above Space for Recorder's use only

(NOTICE: THE PURPOSE 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 IMOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERSISED, YOU AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURESMENTS AND SIGNIFICANT ACTION TAKEN AS AGENT, A COURT 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 THEMANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERSICE THE POWERS GIVEN HERE THROUGHYOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPAINED 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 BACK OF 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 19th day of November, 2004.

1. I, hereby KAREN E. GRAN 5112 N. NEWLAND AVE. CHICAGO IL 60656, Appoint (INSERT NAME AND ADDRESS OF PRINCIPAL)

Appoint: HIRAN GRAN (INSERT NEME 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.
- (b) Financial institution transaction
- (c) ~~Stock and Bond Transaction~~
- (d) ~~Tangible personal property transaction~~
- (e) ~~Bond, share and commodity transaction~~
- (f) ~~Banking transaction~~
- (g) ~~Business operating transaction~~
- (h) ~~Insurance transaction~~
- (i) ~~Claims and litigation~~
- (j) ~~Personal relationship affairs~~
- (k) ~~Benefits from military service~~
- (l) ~~Records, reports and statements~~
- (m) ~~Access to safe deposit box (es)~~
- (n) ~~Tax matters~~

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59

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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 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 prohibition or conditions on the sale of particular stock or real estate or special rules on the borrowing by the agent):

3. In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers including, with limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke any trust specifically referred to below):

YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN THE 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:)

6. () This power or attorney shall become effective on NOVEMBER 23, 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. () This power of attorney shall terminate on NOVEMBER 24, 2004

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(insert a future date or event, such as court determination of your disability, when you want this power of 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)

8. If any agent named by me shall die, become incompetent, resign or refuse the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

N/A

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or 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 YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A RETAINNING 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 any estate (my property) is to be appointed, I nominate the agent 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 import of this grant of powers to my agent.

Signed X Karen E. Graw
(PRINCIPAL)

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(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES BELOW, IF YOU INCLUDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURE OF THE AGENTS.)

Specimen signatures of agent (and successors)

I certify that the signatures of my agent (and successors are correct)

Karen E. Grua
(AGENT)

Karen E. Grua
(PRINCIPAL)

(SUCCESSOR AGENT)

(PRINCIPAL)

(SUCCESSOR AGENT)

(PRINCIPAL)

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS SAME IS NOTORIZED, USING FORM BELOW.)

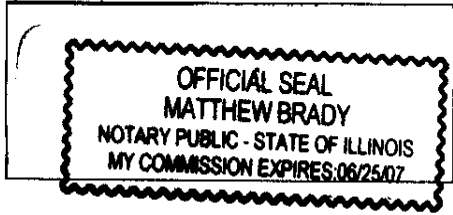
STATE OF Illinois

COUNTY OF COOK SS

The undersigned, a notary public in and for the above County and State, certifies that KAREN E. GRUA known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me in person and acknowledged signed 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: NOVEMBER 19, 2004
(SEAL)

Matthew Brady
(NOTARY PUBLIC)



My commission expires June 25, 2007

(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: KAREN E. GRUA

Legal Description: 1/2 mail to: 5715 W. Newland Ave Chicago IL 60656

Street Address:

Permanent Tax Index Number:

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CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1410 008259101 UA
STREET ADDRESS: 5115 N. NEWLAND AVENUE
CITY: CHICAGO COUNTY: COOK
TAX NUMBER: 13-07-308-020-0000

LEGAL DESCRIPTION:

LOT 20 IN BLOCK 8 IN WALTER G. MC INTOSH'S 2ND ADDITION TO NORWOOD HEIGHTS,
BEING A SUBDIVISION OF A PART OF SECTION 7, TOWNSHIP 40 NORTH, RANGE 13 EAST OF
THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED, OF SAID
SUBDIVISION, RECORDED IN THE RECORDER'S OFFICE OF COOK COUNTY, ILLINOIS, OCTOBER
2, 1925, AS DOCUMENT NUMBER 9053441, IN COOK COUNTY, ILLINOIS

Property of Cook County Clerk's Office