Doc#: 0500402451 Eugene "Gene" Moore Fee: \$50.00 Cook County Recorder of Deeds

Date: 01/04/2005 01:15 PM Pg: 1 of 3

A240-10 R240-04

LIMITED POWER OF ATTORNEY

(With Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCU-MENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSON-AL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU, YOU MAY SPEC TY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF TI EF F IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDER-STAND, YOU SHU'LL) ASK A LAWYER TO EXPLAIN IT TO YOU. YOU MAY REVOKE THIS POWER OF AT FURNEY IF YOU LATER WISH TO DO SO.

TO ALL PERSONS, be it know a, the I, GLAD VS TIMOTHEE-JOHNS TON of 4243 Colvert ST. L. Nov 63134, as Grantor, do hereby make and grant a lin specific power of altoracy to VAII-E IMPERIAL, of Chicago, I amount and constitute said individual as my attorney-in-fact.

My named attorney-in-fact shall have full 1 owe er authority to undertake, commit and p acts on my behalf to the same extent as if I had one so personally; all with full power of s in the presence: (Describe specific authority)

four of a mone The authority granted shall include such incidental acts at are reas nat form the specific authorities and duties stated or contemplated herein.

My attorney-in-fact agrees to accept this appointment subject to its ten s, and agrees to act and perform in said fiducing capacity consistent with my best interests as my attorney-in-fact decay an sable, and I thereupon ratify all acts so cannot out.

I agree to reimburse my attorney-in-fact all reasonable costs and expenses incurr d ir the fulfillment of the duties and responsibilities enumerated herein.

Special durable provisions:

This power of attorney shall not be affected by subsequent incapacity of the Grantor. This power of attorney may be revoked by the Grantor giving written notice of revocation to the attorney-in-fact, provide and any party relying in good faith upon this power of attorney shall be protected unless and until said party has either a actual or constructive notice of revocation, or b) upon recording of said revocation in the public records where the Grantor resides.



BOX15-

CH60 - DI. 60605

0500402451 Page: 3 of 3

UNOFFICIAL COPY



TICOR TITLE INSURANCE COMPANY

ORDER NUMBER: 2000 000556745 CH STREET ADDRESS: 9607 S. MERRILL AVE.

CITY: CHICAGO COUNTY: COOK COUNTY

TAX NUMBER: 25-12-203-047-0000

LEGAL DESCRIPTION:

LOT 19 IN JEFFERY MANOR SUBDIVISION BEING A RESUBDIVISION OF PART OF BLOCK 1, ALL OF BLOCKS 2 AND 10, BOTH INCLUSIVE, AND PART OF BLOCK 11, INCLUDING VACATED ALLEYS AND VACATED PARTS OF SOUTH CLYDE AVENUE, SOUTH PAXTON AVENUE, EAST 96TH STREET, EAST 96TH PLACE, EAST 97TH STREET, EAST 97TH PLACE, EAST 98TH STREET, IN 2 OF Th.
MIPD PRIN

OR COLUMN CLEAR SO OFFICE AND EAST 98TH PLACE, ALL IN THE HUGH MAGINNIS' 95TH STREET SUBDIVISION OF THE EAST 1/2 OF THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION 12, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.