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Doc#: 0514404167
Eugene "Gene" Moore Fee: \$66.00
Cook County Recorder of Deeds
Cook County Recorder of Deeds
Date: 05/24/2005 11:24 AM Pg: 1 of 7

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

FCT (42043 (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 AT IL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT EXERCISE CXANTED 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 RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS 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 THE MANNER PROVIDED BELOW. UNTIL YOU'ZEVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, LVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FOR 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 POWERS 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 16 day of May, 2005.

1. I, Jose F. Zavala, 3829 S. Harvey, Berwyn, IL 60402.

hereby appoint: Martha Diaz de Leon, 3829 S. Harvey, Berwyn, IL 60402.

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 CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

- (a) Real Estate transactions.
- (b) Financial institution transactions,
- (c) Stock and bond transactions.
- (d) Tangible personal property transactions.
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (b) Social Security, employment and military service benefits.
- (i) I ix matters,
- (i) C'an is and litigation.
- (k) Covare dity and option transactions.
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

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

Tollowing pa	ower granted above shall not include the Telle wing powers or shall be modified or limited in the articulars (here you may include any specific includency you deem appropriate, such as a corrections on the sale of particular stock or real entate or special rules on borrowing by the
	7.6
other delega	tion to the powers granted above, I grant my agent the following powers (here you may add ble powers including, without limitation, power to make gifts, exercise powers of appointment age beneficiaries or joint tenants or revoke or amend any trust specifically referre 1 to below)

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

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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.

(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 this power of attorney.

(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME IN ANY MANAGE. ABSENT AMENDED OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME POWER IS SIGNED AND WILL CONCERN TO UNTIL YOUR DEATH UNLESS A LIMITATION ON THE BEGINNING DATED OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

6. This power of attorney shall become effective on	
may 1-0 - 2005	
7. This power of attorney shall terminate on	
may - 19 - 2005	
(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) SUCH SUCCESSORS(S) IN THE FOLLOWING PARAGRAPH.) 8. If any agent pared by the shell die become incompetent, the first are seen to be accepted by the first and seen to be accepted to the first and	
8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of age. I name the following (each to act alone and successively, in the order named) as successor (s) to such a	gent, gent:

NONE

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or a 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 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 SERVES YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOU AGENT TO ACT AS GUARDIAN.)

9. If a guardian of my estate (my property) is to be appointed, I nominated the agent acting under this power attorney as such guarding, to serves without bond or security.

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10. I am fully informed as to all the contents of this form and understand the full import of this grant

powers to my agent.

4	Signer T
	Jose F. Zavala
(YOU MAY, BUT ARE NOT REQUIRED TO, I AGENTS TO PROVIDE SPECIMEN SIGNATU SIGNATURES IN THE POWER OF ATTORNE OPPOSITE THE SIGNATURES OF THE AGEN	TRES BELOW, IF YOU INCLUDE SPECIMEN EY, YOU MUST COMPLETE THE CERTIFICATION
Specimen signatures of agent (and successors) Marifa Riog Of Leon (agent)	I certify that the signatures of my agent (and successors) are correct. principal)
(successor agent)	(principal)
(successors agent)	(principal)
004	(principal)
	T'S OFFICE

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(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED <u>AND</u> <u>SIGNED BY AT LEAST ONE ADDITIONAL WITNESS.</u> USING THE FORM BELOW.)
State of L
County of Cook SS.
The undersigned, a notary public in and for the above country and county and state, certifies that See Zovala, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and additional witness in person acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes herein set forth (and certified to the correctness of the signature(s) of the agent(s)). Dated: 5/76/5 Notary Public
My commission expires:
"CHEICIAL SEAL" SAMUE B. BEREZIN Notary Public, State of Illinois My Commission Experts Alox 6, 2006

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The undersigned witness certifies that	José	F.	ZAVALA	, known				
to me to be the same person whose name is								
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 him or her to be of sound mind and memory.								
:				_				
Dated: 5-18-5		<u>×</u>	(Mania (-)	ausla.				
(Seal)			/ Witness/)				
(THE NAME AND ADDRESS OF THE FIFT THE AGENT WILL HAVE POWER T								

This document was propared by A Mail To

Carlos A. De Leoa
Attorney at Law
960 Rand Road, Ste 210
Des Plaines, IL 60016

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PROPERTY LEGAL DESCRIPTION:

THE SOUTH 30 FEET OF SUB LOT 4 IN THE SUBDIVISION OF LOT 43 IN THE SUBDIVISION OF THE SOUTHEAST 1/4 OF THE SOUTHWEST 1/4 AND THE SOUTH 1/2 OF THE SOUTHWEST 1/4 OF SECTION 32, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PERMANENT INDEX NUMBER:

16-32-327-032

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