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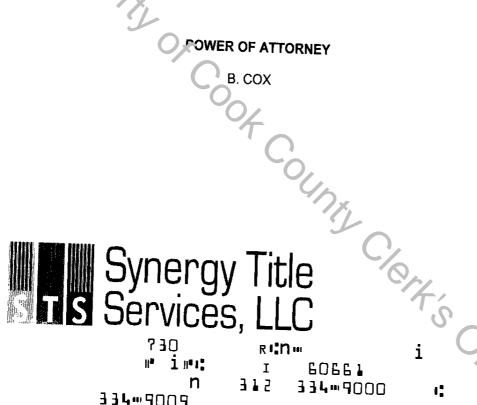
Doc#: 0516726088

Eugene "Gene" Moore Fee: \$34.00 Cook County Recorder of Deeds Date: 06/16/2005 03:05 PM Pg: 1 of 6

RA0500319

For Recorder Use Only

POWER OF ATTORNEY
B. COX



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315 334-9000 334~9009

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RAU 800319 Synerce

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY DURABLE POWER OF ATTORNEY

(The place above for Recorders use only) Legal Description: See attached Legal Description This Power of Attorney is being created for the purpose of refinancing the property located at: Street Address: 1313 N RITCHIE CT APT 907 City CHICAGO, il. 60610 Permanent tax index #. 17-03-108-017-1145 (The above can be deleted if real estate not subject to the Power of Attorney.) (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 OF PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOESN(T 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 KFEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS A AGENT. A COURT CAN 1/3/E AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT NOT ACTING PROPERLY. YOU MAY NAME SUCCESSORAGENTS UNDER THIS FORM BUT NOT AS CO-AGNETS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING OVYOUR 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 MCAF FULLY IN SECTION 3-4 OF THE ILLINOIS "STARUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICK 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____ day of (same day as Effective Date) (month) 1. I, Barbara Cox - 1313 N RITCHIE CT APT 907 (insert name and address of Principal (person needing the POA)) hereby appoint: RYAN SEE - GUARANTEED RATE (insert name and address of Agent (person who will be signing on behalf of Principal)) as my attorney-in-fact (my "agent") to act for me 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 specific powers inserted in paragraph 2

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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 A 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.
- Tangible personal property transactions. (d)
- Safe deposit box transactions. (e)
- Insurance and annuity transactions. (f)
- (g) Retirement plan transactions.
- Social Security, employment and military service benefits. (h)
- (i) Tax matters.
- Claims and litigation. (i)
- Commodity and option transactions. (k)
- Businger transactions. (l)
- Borrowing transactions. (m)
- Estate transactions. (n)
- All other proparty powers and transactions. (o)

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

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 a prohibition or conditions on the sale of pa ticular stock or real estate or special rules on borrowing by the agent):
	Not Applicable
3.	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 Not Applicable

(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

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 SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION AS AGENT.)

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of

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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 REVOKATION, 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 INITIALIZING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

LIMITATION (BOTH) OF THI	ON THE BEGINNING DATE OR DURATIO E FOLLOWING:)	GNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A N IS MADE BY INITIALIZING AND COMPLETING EITHER (OR
	XX) This power of attorney shall become	
2	2/24/05	
(insert a future power to first to	date or event during your lifetime, such ake effect)	as court determination of your disability, when you want this
7. ()	(X) This power of attorney shall terminate	on
3 <u>/</u> S0	ONER	E, WHICH EVER IS
		our disability, when you want this power to terminate prior to
		THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S)
		incompetent, resign or refuse to accept the office of agent, I cessively, in the order named) as successor(s) to such agent:
<u>No</u>	t Applicable	
YOUR ESTATE, REQUIRED TO, ITHE COURT FINITIES PARAGRAPH 9 II	as certified by a licensed physician. (IEN THE EVENT A COURT DECIDED THATED SO BY RETAINING THE FOLLOWING BOS THAT SUCH APPOINTMENT WILL SEIT YOU DO NOT WANT YOUR AGENT TO A	
10. I an pow	or fully informed as to all the contents of ers to my agent.	f this form and understand the full mport of this grant of
	Signed: XX	(principal)
(YOU MAY, BUT SPECIMEN SIGNA THE SIGNATURES	ARE NOT REQUIRED TO, REQUEST TURES IN THIS POWER OF ATTORNEY OF THE AGENTS.)	YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE YOU MUST COMPLETE THE CERTIFICATION OPPOSITE
Specimen signatur XX (agent)	es of agents (and successors)	I certify that the signatures of my agent (and successors are correct) XX (principal)
XX(successor	N/A agent)	XX

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Witness: Signature Glenn Witness: Printed Name (THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTORIZED, USING THE FORM BELOW.) State of Illinois) ss. County of Cool I, the undersigned a Notary Public in and for the said County in the State of aforesaid, Do Hereby Certify that personally known to me to be the same person whose name is subscribed as Principal to the foregoing Power of Attorney, appeared before me, and the additional witness, this day in person, and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and Dated: OFFICIAL SEAL JOHN DILOF THE **NOTARY PUBLIS** County Clark's Office MY COMMISSION - X - RES: 08-28-06 (Space for Notary Seal above)

Prepared by and when Recorded mail to:

Name:

Guaranteed Roto

Street Address:

3940 N. Raverswood

City, St, Zip:

CHICASO, IL 60613

Attn Post Closing

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UNOFFICIAL COPY Chicago Title Insurance Company

A.L.T.A. COMMITMENT

SCHEDULE A (continued)

File Number: RA0500319

Commitment Number: RA0500319

LEGAL DESCRIPTION

UNIT 907 IN RITCHIE COURT PRIVATE RESIDENCES CONDOMINIUM AS DELINEATED ON A SURVEY ON THE FOLLOWING DESCRIBED REAL ESTATE:

THAT PART OF LOTS 10 TO 14, INCLUSIVE AND LOTS 1 TO 5, INCLUSIVE, IN BLOCK 2 IN H.O. STONE'S SUBDIVISION OF ASTOR'S ADDITION TO CHICAGO, IN THE FRACTIONAL NORTHWEST 1/4 OF SECTION 3, TOWNSHIP 39 NORTH, RANGE 14 WAST GET THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS:

BEGINNING AT THE INTERSECTION OF THE WEST LINE OF SAID LOT 10 WITH A LINE DRAWN PARALLEL TO AND 100 FEET SOUTH OF (AS MEASURED AT RIGHT AGLES TO) THE NORTH LINE OF SAID BLOCK 2; THENCE EAST ALONG THE LAST DESCRIBED LINE, A DISTANCE OF 100 FEET; THENCE SOUTHEASTERLY ON A LINE DRAWN PARALLEL TO AND 100 FEET (AS MEASURED ON THE NORTH AND SOUTH LINE OF SAID BLOCK (2) EAST OF THE WEST LINE OF SAID BLOCK 2, TO THE NORTH LINE OF SAID LOT 4: THENCE EAST ON SAID NORTH LINE OF LOT 4 TO ITS INTERSECTION WITH A LINE DRAWN PARALLEL TO AND 102 FEET (AS MEASURED ON THE NORTH AND SOUTH LINE OF SAID BLOCK 2) EAST OF THE WEST LINE OF SAID BLOCK 2; THENCE SOUTHEASTERLY ALONG THE LAST DESCRIBED LINE, A DISTANCE OF 161.50 FEET, (MEASURED 161.51 FEET RECORD) MORE OR LESS, TO A POINT ON THE SOUTH LINE OF SAID LOT 1, WHICH IS 102 FEET EAST OF THE SOUTHWEST CORNER OF SAID LOT 14; THENCE WEST ALONG THE SOUTH LINE OF SAID BLOCK 2 (BEING THE NORTH LINE OF EAST GOETHE STREET) A DISTANCE OF 102 FEET TO THE SOUTHWEST CORNER OF SAID BLOCK 2; THÉNCE NORTHWESTERLY ALONG THE WESTERLY LINE OF SAID BLOCK 2 (BEING THE EASTERLY LINE OF RITCHIE COURT), A DISTANCE OF 182.47 FEET, MORE OR LESS, TO THE POINT OF BEGINNING, WHICH SURVEY IS ATTACHED AS EXHIBIT 'A' TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT 03081292 AND AMENDED BY DOCUMENT 94189912, AND AMENDED BY DOCUMENT 94790879, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS.