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Doc#: 0521546023 Eugene "Gene" Moore Fee: \$32.00 Cook County Recorder of Deeds Date: 08/03/2005 08:45 AM Pg: 1 of 5

COOK COUNTY RECORDING

| DEED | |
|------------|-----------------|
| MORTGAGE | 3 |
| ASSIGNMEN | NT |
| POWER OF A | TTORNEY |
| RELEASE | C |
| SUBORDINA | ATION ACKEEMENT |
| OTHER | 'SO. |
| , | TION AGREEMEN |

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

(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 OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT 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 KEEP A 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 REVOKE THIS POWER OR A COURT ACTING ON YOUR IN HALF 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 MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SKORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PAR' (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 1st day of July 2005

1. We, James Alan Durham and Michelle Lynn Durham, hust and and wife, having an interest along with Charles Francis Ford in 12755 Archer Ave., Lemont, Illinois Lareby appoint:

Charles Francis Ford

as our attorney-in-fact and as our "agent") to act for us and in our name in arry way we could act in person with respect to the following powers, as defined in Section 3-4 of the Strattory Short Form Power of Attorney for Property Law" (including all amendments), but subject to any limitations on or PREPARED BY & MAILTO: PHARLES FORD, SR. 12755 ARCHER AVE. LEMONT, IL 60439 additions to the specified powers inserted in paragraph 2 or 3 below:

MAIL!

(a) Real estate transactions.

(b) Financial institution transactions.

(c) Stock and bend 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 military service benefits.

(i) Tax matters.

(i) Claims and litigation.

(k) Commodity and option transactions.

0521546023 Page: 3 of 5

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- (I) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

| 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 particular stock or real estate or special rules on borrowing by the agent):NONE | |
| | |
| 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 drange beneficiaries or joint tenants or revoke or amend any trust specifically | |
| referred to below): To be any and all acts necessary to obtain a home equity loan and thus establish a | |
| mortgage on real estate at 12155 Archer Avenue, Lemont, Illinois 60439, including but not limited to | |
| the signing on our behalf of any nortgage and related documents necessary for this | |
| transaction | |
| (YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY | |

(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.)

- 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 when 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 FOR IOT 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 at \$10 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. (X) This power of attorney shall become effective on July 1, 2005
- 7. (X) This power of attorney shall terminate on July 31, 2005 (IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

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| | essimply in the order named) as accept the other of again, |
|--|--|
| | cessively, in the order named) as successor(s) to such |
| agent None | |
| For myrana of this arrayash 9 a same shall | the considered to be incompatent if and a Lile the access |
| | be considered to be incompetent if and while the person |
| | abled person or the person is unable to give prompt and |
| intelligent consideration to business matters, as | certified by a licensed physician. |
| 10. We each are fully informed as to all the com | tents of this form and understand the full import of this |
| grant of powers to my agent. | |
| | |
| Signed Michelle L. Duhan (principal) | ~ 1 |
| (nrincinal) | (principal) |
| (VOLIMAY RITTADE NOT RECHIRED TO |), REQUEST YOUR AGENT AND SUCCESSOR |
| * | TURES BELOW. IF YOU INCLUDE SPECIMEN |
| SIGNATURES IN THIS FOWER OF ATTOR | |
| CERTIFICATION OPPOSITE 77/E SIGNATURE | |
| | res agent (and successors) of my agent (and successors) |
| are correct. WAIVED (ag | |
| | (successor agent) (principal) |
| (SEALLES OF BELLE) (Principal) WATALO. | / (эклезэл авст) (ринара) |
| CTHIS POWER OF ATTORNEY WILL NOT | BE EFFECTIVE UNLESS IT IS NOTARIZED AND |
| SIGNED BY AT LEAST ONE ADDITIONAL | |
| SIGNED DI AI LEASI ONE ADDITIONAL | 2 WINESS, USHVO THE PORM BELOW.) |
| State of Illinois) | 46 |
|) SS. | 1/h |
| County of Cook) | 4 |
| • | for the above courty and state, certifies that Michelle |
| . | to me to be the same person whose names are subscribed |
| - | , appeared before me and the additional witness in person |
| | strument as the free and voluntary act of the principals, |
| for the uses and purposes therein set forth | stunian as the nee and von hary are or the principals, |
| to the use and pulposes that the total | ^^^^ |
| Dated: July 1, 2005 (SEAL) | ₹ OFFICIAL SEAL ₹ |
| State of the state | DAVID R ANDERSON |
| David R. Anderson Notary Public | NOTARY PUBLIC, STATE OF ILLINOIS |
| My commission expires | MY COMMISSION EXPIRES:03/15/06 } |
| му сишважи сърнса | |
| The undersianed witness cartifies that Michell | e Lynn Durham and James Alan Durham, known to me to |
| • | s principal to the foregoing power of attorney, appeared |
| •••••••••••••••••••••••••••••••••••••• | ged signing and delivering the instrument as the free and |
| | ourposes therein set forth. I believe him or her to be of |
| | representation of the livery telling in the color |
| sound mind and memory | Λ |
| Sound mind and memory. Dated: July 1 2005 (SEAL) | Witness |
| Dated: July 1, 2005 (SEAL) | Witness SON PREPARING THIS FORM SHOULD BE |

0521546023 Page: 5 of 5

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INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL **ESTATE.**)

This document was prepared by: David R. Anderson, Attorney at Law, 670 Schultz Street, Lemont, **Illinois 60439**

Legal Description of Property Affected:

The North 208 feet of the West 1047.35 feet(except the East 523.62 feet thereof) of the South ½ of the Northeast ¼ of the Northeast ¼ of Section 33, township 37 North, Range 11, East of the third principal meridian, in Crox County, Illinois

PIN NUMBER: 12-33-201-021-0000

Archer.

OF COOK COUNTY CLOPA'S OFFICE Commonly known as 12755 Archer Avenue, Lemont, Illinois 60439-7427