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# ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Doc#: 0523020073 Fee: \$32.00 Eugene "Gene" Moore
Cook County Recorder of Deeds

Date: 08/18/2005 12:36 PM Pg: 1 of 5

(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 OK 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 A CAFOR YOUR BENEFIT OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT

FIRST AMERICAN TITLE ORDER # 114 3209

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 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 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. THAT LAW EXPRESSLY PERWITS 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 27 day of July, 2005

I, Lisa C. Eidelman, 4410 Brownstone, Waukegan, IL 60085 (insert current d address) hereby appoint Mark Eidelman, 4410 Brownstone, Waukegan, IL 60085 as my attorney-infact (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



0523020073 Page: 2 of 5

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CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YO	ЭU
MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)	

Real estate transactions. (a) Financial institution transactions. <del>(b)</del> Stock and bond transactions. Tangible personal property transactions. <del>(d)</del> Safe deposit bond transactions. <del>(e)</del> Insurance and annuity transactions. (f)Retirement plan transactions. Social Security, employment and military service benefits. <del>(h)</del> Tax matters. <del>(i)</del> - Claims and litigation. Commodity and option transactions. Ausiness operations. <del>(1)</del> Borrowing transactions. (m)

All other preperty powers and transactions.

Estate transactions.

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

**NONE** 

<del>(n)</del>

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 referred to below):

Specifically authorized to sign any all documents required to close on the purchase of 3801 North Fremont, Unit #2, Chicago, IL, including but not limited to Notes, Mortgages, Waiver of Homestead Rights, TIL, GFE, 1003 and HUD1 etc.

Property: 3801 North Fremont, Chicago, IL

SEE ATTACHE LEGAL DESCRIPTION.

(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.)

0523020073 Page: 3 of 5

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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 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 GRANGED 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 July 26, 2005
- 7. (x) This power of attorney shall terminate on August 5, 2005

(insert a future date or event, such as court determination of your disability, when you want this power 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 to accept the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

**NONE** 

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an 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 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 my person is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

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10. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.		
this grant of powers to my agent.	s of this form and understand the full import of gned: 1/27/0 Lisa C. Eidelman	
	Lisa C. Eideiman ( principal)	
(YOU MAY, BUT ARE NOT REQUIRED TO SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES IN THE COMPLETE THE CERTIFICATION OPPOSI	REQUEST YOUR AGENT AND IMEN SIGNATURES BELOW. IF YOU IS POWER OF ATTORNEY, YOU MUST	
Specimen signatures of agent I of	certify that the signatures	
	my agent (and successors)	
	e correct	
mw ry	Ja Chileman 7/27/05	
Agent- Mark Eidelman Pri	ncipal- Lisa C. Eidelman	
(THIS POWER OF ATTORNEY VILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED, USING THE FORM BELOW)  State of Illinois )  SS.  County of Lake )  The undersigned, a notary public in and for the above county and state, certifies that Lisa C.  Eidelman known to be the same person whose name is subscribed as principal to the foregoing power of attorney. Appeared before in person and acknowledged signing 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: 70 COS  (SEAL)  NOTARY PUBLIC  My Commission Expires OR  My Commission Expires OR		
The undersigned witness certifies that Lisa C. Eidelman known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared refore me in		
person and acknowledged signing 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))	$\mathcal{M}//$	
Dated: $\sqrt{-2/-0}$	///////	
(SEAL)	WITNESS	
(THE NAME AND ADDRESS OF THE PER INSERTED IF THE AGENT WILL HAVE POESTATE.) This document was prepared by:  Montlake Drive, Rockford, Illinois 61114  And Return	SON PRÉPARING THIS FORM SHOULD BE OWER TO CONVEY ANY INTEREST IN REAL Christine L. Garner, Attorney at Law, 3295	

0523020073 Page: 5 of 5

## UNO EXITER C. AGAL GES CO. PROVI

Unit H in the Grace Condominium, as delineated on a survey of the following described real estate:

Lots 1, 2 and the West 25 feet of Lot 3 in Andrew Kennedy's Subdivision of Lot 4 and the West 50 feet of Lot 5 in the Assessor's Division of Block 8 in Laffin, Smith and Dyer's Subdivision of the Northeast 1/4 (except 1.28 acres in the Northeast corner) of Section 20, Township 40 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois, which survey is attached as Exhibit "A" to the Declaration of Condominium recorded as Document 24926146 together with its undivided percentage interest in the common elements.

