7005-01 JUNOFFICIAL COPY

Illinois Power of Attorney Act: Statutory Short Form Power of Attorney For Property 755 ILCS 45/3-3

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 OF 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 1'KEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IT 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 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 PAKT (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 ANY THING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

POWER OF ATTORNEY made this ..

1.I, Kenneth Knighten, 11296 Torrey Pine Road, LaJoya, California 92037-1010, hereby appoint: Gina M. Smith, my attorney.

(insert name and address of agent) 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:

(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.) Mail to.

Doc#: 0528741064 Fee: \$58.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds

Date: 10/14/2005 10:46 AM Pg: 1 of 5

TRISTAR TITLE, LLC 7358 LINCOLN AVE., SUITE 120 LINCOLNWOOD, IL 60712

0528741064 Page: 2 of 5

UNOFFICIAL COPY

(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): |
|--|
| |
| |
| 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 appoir anent, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred 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-N AKING POWERS TO OTHERS, YOU SHOULD KEEP THE NEXT SENTENCE, OTHER WISE IT SHOULD BE STRUCK OUT.) |
| 4.My agent shall have the right by written instrument to uelegate 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 ATTOTINEY. 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 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 NITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:) |
| , |

6.() This power of attorney shall become effective on July 13, 2005. (insert a future date or event during your lifetime, such as court determination of your disability, when you want this power to first take effect)

-0528741064 Page: 3 of

UNOFFICIAL COPY

| () Tam bower of seionnes saus ferminate | 00 July 30, 2005. |
|--|--|
| (insert a future date or event, such as court det | ermination of your disability, when you want this |
| power to terminate prior to your death) | • |
| (IF YOU WISH TO NAME SUCCESSOR AC | HENTS, INSERT THE NAME(S) AND |
| ADDRESS(ES) OF SUCH SUCCESSOR(S) I | N 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; | man and a man called the man of t |
| processing to some affirmation | |
| and the same of the same same same same same same same sam | |
| For menone of this name with 2 a storon shall | l be considered to be incompetent if and while the |
| ror purposes of the spendgraph of a person much | at or disabled person or the person is unable to give |
| propert and interfer or an adjustment in to business | at or disabled person of the person is unable to give is matters, as certified by a licensed physician, (IF |
| A CALL MARKET AND PLANTING WAS A CALLED TO DESCRIPTION OF DESCRIPT | S matters, as contined by a modused physician. (if |
| YOU WISH TO NAME TOUR AGENT AS O | FOUR DAR APPOINTED MALE, IN THE |
| NOT PROPERTY TO DE GO DY PROPERTY | OULD BE APPOINTED, YOU MAY, BUT ARE |
| NOT REQUIRED TO, DO SO PY RETAININ | G THE FOLLOWING PARAGRAPH, THE |
| COURT WILL APPOINT YOUP. / JENT IF | |
| | INTERESTS AND WELFARE, STRIKE OUT |
| PARAGRAPH 9 IF YOU DO NOT WANT YO | OUR AGENT TO ACT AS GUARDIAN.) |
| | |
| 9.If a guardian of my estate (my property) is to | o appointed, I nominate the agent acting under |
| this power of attorney as such guardian, to servi | o without bond or security. |
| | |
| 10.I am fully informed as to all the contents of t | this form on I understand the full impact of this |
| grant of powers to my agent. | mes source and a concession one unit united the fatth |
| | 46 |
| Signed | (Bally 2/1) Promost Problem |
| And and to any as produced and an article of the second control of | (Principal) |
| CONTRACT DEEP ADD MOT BEOT BEOTHERS TO | THOUSE TO BE A SECOND OF THE S |
| ACENTE TO TROUBER OF STREET OF STREET | REQUEST YOUR AGENT AND SUCCESSOR |
| MUDATS TO PROVIDE SPECIMEN SIGNAT | URES BELOW. IF YOU EVOLUDE SPECIMEN |
| SIGNATURES IN THIS POWER OF ATTORN | VEY, YOU MUST COMPLETE THE |
| CERTIFICATION OPPOSITE THE SIGNATU | RES OF THE AGENTS.) |
| | (3) |
| Specimen signatures of agent (and successors) | I odriffy that the signatures of my agent (and |
| (and sections) | successors) and accreed |
| YM CONTRACTOR | |
| graf Gion M. Smith | Principal - Kenneth Knighten |
| | |
| gent | Principal |
| | · · · · · · · · · · · · · · · · · · · |
| gent | Principal |
| | |

_0528741064 Page: 4 of 5

UNOFFICIAL COPY

| (THIS POWER OF ATTORNEY | WILL NOT BE EFF | FECTIVE UNLESS I | T IS NOTARIZED, |
|-------------------------|-----------------|------------------|-----------------|
| USING THE FORM BELOW.) | | | |

State of Illinois)
SS.
County of Cook)

The undersigned, a notary public in and for the above county and state, certifies that Kenneth Knighten..., 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 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

Official Seal Gine i.e. Smith Notary Public State of Illinois My Commission Expres 11/11/07

the agent(s)).

Dated: (SEAL)

Notary Public

My commission expires

Dated: (SEAL)

Witness

(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE.)

This document was prepared by: Gina M. Smith, Attorney at Law, 47 West Polk Street, #212, Chicago, Illinois 60604

0528741064 Page: 5 of 5

UNOFFICIAL COPY

Exhibit "A" - Legal Description

LOTS 1008 AND 1009 IN F.H. BARTLETT'S GREATER CHICAGO SUBDIVISION NO. 1 BEING A SUBDIVISINOF THE EAST HALF OF THE SOUTH WEST QUARTER AND PART OF THE EAST QUARTER OF SECTION 10, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING WEST OF THE ILLINOIS CENTRAL RAILROAD IN COOK COUNTY, ILLINOIS

Property of Cook County Clark's Office