Oct-24-2005 05:13pm

## From-LA COFFICE OFFICE A 123320 014 C

Doc#: 0534102298 Fee: \$62.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 12/07/2005 10:40 AM Pg: 1 of 6

7 TITLE order # 126 7232

POWER OF ATTORNEY made this 29th day of October

XXXXXX 2005.

1. I, Kristen L. Stiffler hereby appoint Richard C. Stiffler 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 eddition to the specified powers inserted in paragraph 2 or 5 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.)

(a) Real estate transactions. x (9)xxx x ripancial institution as an actions xxx x (e) xxxx Stock wad voud transaction y xxxxx Kariti karang dengang x(e)xxxx<del>Safaxdeposit\_boxxtransagtiona</del>xx.xxx Insurance and Annuity transactions, XX \*xbenefits Tax matters. OFFICE

(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 particular stock or real estate or special rules on borrowing by the agent):  N/A
	- O-a
2	T. 1391
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 must specifically referred to below):
	N/A

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

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 MAINER. 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 BEGIN AND DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER [OR NOTH] OF THE FOLLOWING:)

- 6. [X] This Power of Attorney shall become effective on October 31, 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.)
- 7. [X] This Power of Attorney shall terminate on November 1, 2005 . (Insert a fixture 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:  N/A

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 disables 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 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.
- and independent of the contract of the contrac I am fully informed as to all the contents of the form and nderstand the full import of this grant of powers to my agent.

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From-LACOFCE OFFIC A 3123320 04 C Oct-24-2005 05:14pm

> (THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS.)

STATE OF COUNTY OF COOK SS

> The undersigned, a notary public in and for the above county and state, certifies that Kristen L. Stiffler 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 fre : and voluntary act of the principal, for the uses and purposes therein set form (, and certified to the correctness of the signature(s) of the agent(s)).

10/29/00

(SELL) OFFICIAL SEAL THOMAS A BELLINO NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:02/16/09

Notary Public

My or ormission expires:

The undersigned witness certifies that KRISTEN L. STIFFLER known to me to be the same person whose name is subjected as principal to the foregoing power of attorney, appeared before me and the rutary public and acknowledged signing and delivering the instrument as the iree 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: 10/29/05 (SEAL)

(The name and address of the person preparing this form should be inserted Notary Public. State of Illinois will have power to convey any interest in real estate.)

OFFICIAL SEAL

THIS DOCUMENT WAS PREPARED BY: AND PLYUNK TO:

6

177 L 7018 ON

IKEPUBLIC TITLE

WAFGIF CAAZ AL MAN

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## **UNOFFICIAL COPY**

**LEGAL DESCRIPTION - EXHIBIT A** 

Legal Description: THE EAST 17.52 FEET OF THE WEST 89.52 OF LOTS 153 AND 154 IN JOHN P. ALTGELD'S SUBDIVISION OF BLOCKS 1, 2, 3, 4 AND 7 AND THE NORTH 1/2 OF BLOCK 6 IN THE SUBDIVISION OF THAT PART LYING NORTHEAST OF THE CENTER LINE OF LINCOLN AVENUE OF THE NORTHWEST 1/4 OF SECTION 29, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index #'s: 14-29-102-046-0000 Vol. 0487

Property Address: 1352 West Fletcher Street, Chicago, Illinois 60657

Property of Cook County Clark's Office