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Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 03/20/2006 03:31 PM Pg: 1 of 5

Property of Cook County Clerk's Office
Power
of Attorney

STEVEN M. ROGERS AS ATTORNEY AND AGENT, CERTIFIES THAT THE ATTACHED DOCUMENT IS A TRUE AND EXACT COPY OF THE ORIGINAL.

ILLINOIS STATUTORY SHORT FORM

DATED: 1/21/06

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Signature: Steven M. Rogers

(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 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 (SEE PAGES 4 AND 5 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 21st day of January, 2006.

1. I, **ELIZABETH WALKOWITZ**, residing at 6526 Irving Park Road, Chicago, Illinois 60634, hereby appoint my niece, **ANNA COVINGTON**, 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 THE 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. | (f) Insurance and annuity transactions.. | (k) Commodity and option transactions. |
| (b) Financial institution transactions. | (g) Retirement plan transactions | (l) Business operations. |
| (c) Stock and bond transactions. | (h) Social Security, employment and military service benefits. | (m) Borrowing transactions. |
| (d) Tangible personal property transactions. | (i) Tax matters. | (n) Estate transactions. |
| (e) Safe deposit box transactions. | (j) Claims and litigation. | (o) All other property powers and transactions. |

Handwritten initials: D, 4LC

(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). No modifications or limitations shall be made.

3. In addition to the powers granted above, I grant the 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): (a) to make gifts of my property to my spouse, children and other descendants or to any person or organization to whom I have made gifts prior to this power of attorney becoming effective; (b) to terminate or consent to the termination of any joint tenancy in property of which I am a co-tenant with one or more persons; (c) to change the beneficiary of any insurance policy, annuity, or individual retirement account or other retirement plan account owned by me.

(THE AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN THIS FORM, BUT THE AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IF YOU WANT TO GIVE THE 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 the 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.

(THE 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 THE AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

5. The 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)

FIRST AMERICAN

File # 1332824 10F2

Handwritten initials: F-4

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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. (S) This power of attorney shall become effective on the date hereof.
- 7. (S) This power of attorney shall terminate on my written revocation.

(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 to such agent:

BEATA GRANTIER

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 THE 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 THE AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT THE 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.

10. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to the agent.

Elizabeth Walkowitz

ELIZABETH WALKOWITZ, Principal

(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST THE AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES BELOW. IF YOU INCLUDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)

Specimen signatures of agent (and successor)

I certify that the signatures of the agent (and successors) are correct.

ANNA COVINGTON, Agent

ELIZABETH WALKOWITZ, Principal

BEATA GRANTIER, Successor Agent

ELIZABETH WALKOWITZ, Principal

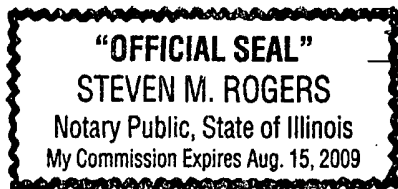
(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)

STATE OF Illinois)
) SS.
COUNTY OF Cook)

I, the undersigned, a Notary Public, DO HEREBY CERTIFY that **ELIZABETH WALKOWITZ**, 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 in person, and acknowledged signing and delivering this instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth (and certified as to the correctness of the signature(s) of the agent(s)).

Dated: January 21, 2006

(SEAL)



Steven M. Rogers
Notary Public

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The undersigned witness certifies that ELIZABETH WALKOWITZ, 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 notary public in person, and acknowledged signing and delivering this instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth. I believe her to be of sound mind and memory.

Dated: January 21, 2006

Chris A Rogers

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 Steven M. Rogers, 3375 F North Arlington Heights Road, Arlington Heights, IL 60004

NAME

STREET ADDRESS

CITY
STATE
ZIP

OR RECORDER'S OFFICE BOX NO. _____

(The Above Space for Recorder's Use Only)

LEGAL DESCRIPTION:

STREET ADDRESS:

PERMANENT TAX INDEX NUMBER:

THE SPACE ABOVE IS NOT PART OF OFFICIAL STATUTORY FORM. IT IS ONLY FOR THE AGENT'S USE IN RECORDING THIS FORM WHEN NECESSARY FOR REAL ESTATE TRANSACTIONS.

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LEGAL DESCRIPTION - EXHIBIT A

Legal Description: PARCEL 1:

UNIT NO. 605 IN MERRIMAC SQUARE CONDOMINIUM II AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE:

LOT 3 IN PONTARELLI SUBDIVISION AT MERRIMAC SQUARE P.U.D., BEING A SUBDIVISION IN THE FRACTIONAL SOUTHEAST 1/4 OF SECTION 18, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

WHICH SURVEY IS ATTACHED AS EXHIBIT "B" TO DECLARATION OF CONDOMINIUM MADE BY PARKWAY BANK AND TRUST COMPANY UNDER TRUST AGREEMENT DATED NOVEMBER 5, 1991 AND KNOWN AS TRUST NUMBER 10176 AND RECORDED IN THE OFFICE OF THE RECORDER OF DEEDS OF COOK COUNTY AS DOCUMENT NUMBER 92718642 TOGETHER WITH ITS UNDIVIDED PERCENT INTEREST IN SAID PARCEL (EXCEPTING FROM SAID PARCEL ALL THE PROPERTY AND SPACE COMPRISING ALL THE UNITS THEREOF AS DEFINED AND SET FORTH IN SAID DECLARATION AND SURVEY.

PARCEL 2:

PERPETUAL, NON-EXCLUSIVE EASEMENT FOR THE BENEFIT OF PARCEL 1 FOR INGRESS AND EGRESS OVER, ALONG AND UPON LAND, AS SET FORTH BELOW, AND FURTHER DELINEATED IN EXHIBIT "A" OF DOCUMENT NUMBER 92607113, FOR DRIVEWAYS, WALKWAYS, COMMON PARKING AND PARK AREAS AS CREATED BY DECLARATION OF COMMON EASEMENTS AND MAINTENANCE AGREEMENT DATED AUGUST 7, 1992 AND RECORDED AUGUST 14, 1992 AS DOCUMENT NUMBER 92607113 BY AND AMONG PARKWAY BANK AND TRUST COMPANY AS TRUSTEE UNDER TRUST AGREEMENT DATED JUNE 9, 1992 AND KNOWN AS TRUST NUMBER 10345, PARKWAY BANK AND TRUST COMPANY AS TRUSTEE UNDER TRUST AGREEMENT DATED NOVEMBER 5, 1991 AND KNOWN AS TRUST NUMBER 10176 AND PARKWAY BANK AND TRUST COMPANY AS TRUSTEE UNDER TRUST AGREEMENT DATED JUNE 9, 1992 AND KNOWN AS TRUST NUMBER 10346.

PARCEL 3:

THE EXCLUSIVE RIGHT TO THE USE OF PARKING SPACE NO. P-45 AND STORAGE SPACE NO. S-45, LIMITED COMMON ELEMENTS AS DELINEATED ON THE SURVEY ATTACHED TO THE DECLARATION AFORESAID, RECORDED AS DOCUMENT NUMBER 92718642.

Permanent Index #'s: 13-18-409-032-1045 Vol. 0343

Property Address: 6526 West Irving Park Road, Unit 605, Chicago, Illinois 60634