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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY



Doc#: 0615646096 Fee: \$32.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 06/05/2006 11:15 AM Pg: 1 of 5

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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 (A COPY OF THIS SECTION IS ATTACHED). 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 13 day of May, 2006

I, Dorrismae Murgatroyd, hereby appoint Linda Nickless 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 any limitations on or additions to the specified power inserted in paragraph 2 or 3 below:

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWER YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWER 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.
- (b) Financial institution transactions.
- (c) Borrowing transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENTS POWER MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

2. The power granted above shall not include the following power 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 the borrowing by the agent: Any and all powers as necessary to refinance: 14810 Ketelaar, Midlothian, IL

3. In addition to the power granted above, I grant my agent the following power (here you may add any other delegable power including, without limitation, power to make gifts, exercise power of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below): Any and all powers necessary to refinance 14810 Ketelaar, Midlothian, IL

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(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWER 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 POWER 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 power 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 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 today _____, (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 June 30, 2006, (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: _____

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 I AGREE. 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.

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

Signed *Ernae Murgatroyd*
(Principal)

YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR 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.)

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Specimen signatures of agent (and successors)

Doris Mae Murgatroyd
(Agent)

(Successor Agent)

(Successor Agent)

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

Doris Mae Murgatroyd
(Principal)

(Principal)

(Principal)

The undersigned witness certified that _____, known to me to be the same person(s) whose name(s) are subscribed as principal(s) to the foregoing power of attorney, appeared before me and the notary in person and acknowledged signing and delivering the instrument as his/her/their fee and voluntary act(s), for the uses and purposes therein set forth.

Witness: *Jean Venegas*
Signature

Name: *Jean Venegas*

Address: *8458 S Kenneth*
Chicago 60652

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED, USING THE FORM BELOW)

STATE OF *Illinois*)
) SS
COUNTY OF *Cook*)

I, the undersigned, a Notary Public in the county and state aforesaid, DO HEREBY CERTIFY that *Doris Mae Murgatroyd* personally known to me to be the same person(s) whose name(s) is/are subscribed to the foregoing instrument, appeared before me in person this day and acknowledged that he/she/they signed, sealed and delivered the instrument as his/her/their free and voluntary act(s), for the uses and purposes therein set forth..

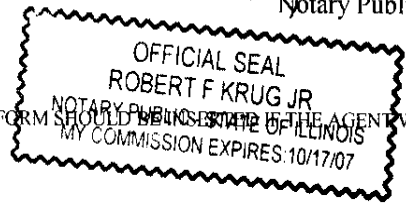
Given under my hand and official seal this *13th* day of *MAY*, 200*6*.

Dated: *MAY 13, 2006* (SEAL)

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Robert F. Krug Jr
Notary Public

My commission expires 10/17/07



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

This document was prepared by:
Robert + Krug Jr 230 W. Monroe #250
CHGO. IL 60606

LEGAL DESCRIPTION: See Attachment

RETURN THIS DOCUMENT TO

Property of Cook County Clerk's Office

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TICOR TITLE INSURANCE COMPANY

ORDER NUMBER: 2000 000587429 OC
STREET ADDRESS: 14810 S. KETELAAR 5W
CITY: MIDLOTHIAN **COUNTY:** COOK COUNTY
TAX NUMBER: 28-10-300-093-1103

LEGAL DESCRIPTION:

UNIT NUMBER 907 IN THE MIDLOTHIAN CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE:
LOTS 1 TO 12 IN KETELAAR'S RESUBDIVISION OF THE SUBDIVISION OF THE SOUTH 333.45 FEET OF BLOCK 4 AND THE NORTH 333.45 FEET OF BLOCK 15 IN ARTHUR T. MCINTOSH'S ADDITION TO MIDLOTHIAN FARMS, BEING A SUBDIVISION OF THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 AND THE EAST 1/2 OF SAID SOUTH EAST 1/4 OF SECTION 9, THE WEST 1/2 OF THE SOUTHWEST 1/4 AND THE WEST 33/80THS OF THE EAST 1/2 OF SAID SOUTHWEST 1/4 OF SECTION 10, TOWNSHIP 36 NORTH, RANGE 13 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 NUMBER 25976363 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS.