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Doc#: 0705826054 Fee: \$50.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Date: 02/27/2007 11:46 AM Pg: 1 of 3

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## 755 ILCS 45/3-3: ARTICLE III STATUTORY FORM POWER ( Cook County Recorder of Deeds

NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON ROBERT COLEMAN DESIGNATES AS HIS "AGENT," WHO IS MY NEPHEW LARRY DANIELS, BROAD POWERS TO HANDLE MY PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO ME OR APPROVAL BY ME. THIS FORM DOES NOT IMPOSE A DUTY ON THE AGENT TO EXERCISE GRANTED POWERS; BUT WHEN SUCH POWERS ARE EXERCISED, THE AGENT WILL HAVE TO USE DUE CARE TO ACT FOR ME, ROBERT COLEMAN'S BENEFIT AND IN ACCORD-ANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFI-CANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF THE AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. ROBERT COLEMAN MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS ROBERT COLEMAN EXPRESSLY LIMITS THE DURATION OF THIS POWER IN THE MANNER PROVIDED BY LAW, UNTIL ROBERT COLEMAN REVOKES THIS POWER OR A COURT ACTING ON MY BEHALF TERMINATES IT, ROBERT COLEMAN'S AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT MY LIFETIME, EVEN AFTER I BECOMES DISABLED. THE POWERS ROBERT COLEMAN GIVES THE AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FOLM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART. THAT LAW EXPLESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY I MAY DESIRE IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, I WILL ASK A LAWYER TO EXPLAIN IT TO YOU.

POWER OF ATTORNEY made this 22nd day of January, 2007.

1. I, ROBERT COLEMAN, 1162 53rd Street, Oakland, California 94608, hereby appoint LARRY DANIELS, 7926 South Campbell Ave., Chicago, Illinois, 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 Law" (including all amendments) but subject to any limitations on or additions to the specific powers inserted in paragraphs 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.).

(a) Real estate transactions.

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(d). Tangible personal property transactions.

(o). All other property powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENTS POWERS MAY BE INCLUDED IN THRE 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, I 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 paragraphs (b), ©, (e)-(n).
  - 3. In addition to the powers granted above, I grant my agent the following powers (here you may add other

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delegable powers including, without limitation, power to make gifts, exercise powers or appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below): NONE OTHER

(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.)

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 su cessor) 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. AND WILL 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 the 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 INTITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING: )

- 6. (x). This power of attorney shall become effective on October 1, 2006 (ir sert 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 at closing, or February 28, 2007, viichever occurs first.

(insert a future date or event, such as court determination of your disability, when you want the 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, 1 dane the following (each to act alone and successively, in the order named) as successor(s) to such agent: NOT APPLICABLE.

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 OU 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. NOT APPLICABLE.
  - 10. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to my agent.

Specimen signatures of agent (and

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(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.)

I certify that the signatures of my

agent (and successors) are correct.

ors) / \	agent (and successors) are correct.
M Nomela	tapet alim
(JARRY DAMELS)	(ROBERT COLEMAN)
(THIS POWER OF A LTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)	
STATE OF CALIFORNIA )	ae.
COUNTY OF Alameda	38
The undersioned a notary public I and for	the county and state, certifies that ROBERT COLEMAN
known to me to be the same person whose name is su'scribed 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 signa ure(s) of the agent	
Dated: 1.22-67 (SI	EAL)
	Lose Mender
My commission expires	9-19-09
WITNESSED BY:	, DATED:, 2007.
STATE OF ILLINOIS; COUNTY OF CO	OK)SS
The undersigned witness certifies that LAFRY DANIELS, known to me to be the same person whose name	
is subscribed as principal to the foregoing rower of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free 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: 1/26/37 (S	EAL) "OFFICIAL SEAL" "OFFICIAL SEAL" Robert L. Anderson Robert L. State of Illinois Robert L. State of Illinois Notary Public. State of Illinois
	Notary Public:
(Document prepared by Robert L. Anderson, Esq., 175 W. Jackson, #2215, Chicago, Il. 60604; (312) 427-3536)	
mail to above	