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Doc#: 0716635389 Fee: \$32.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 06/15/2007 01:55 PM Pg: 1 of 5

# TLLINOIS STATUTORY SHORT FORM OF ATTORNEY FOR PROPERTY OF TO GIVE T POWER OF ATTORNEY FOR PROPERTY

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BRUAL POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELI 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 PCVERS 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 THE BACK OF THIS FORM). THAT LAW EXPRESSLY PFKMITS 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 4th day of May 2007. I. Mihajlo Sretkovic hereby appoints Hranislav Sretkovic, 7911 W. Rascher Avenue, Norwood Park, IL 60656 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 or below:

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATAGORIES OF POWERS YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATAGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATAGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATAGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATAGORY.) Services, Inc.

(a) Real estate transactions.

(b) Financial institution transactions.

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- (d) Tangible personal property transactions.
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (h) Social Security, employment and military service benefits.
- (i) Tax matters.
- (i) Claims and litigation.
- (k) Commodity and option transactions.
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

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

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):

Limited to the refinance of proper	ty known as: 7911 West Rascher,
0	Norwood Park, IL 60656
0/	
	0,
may add any other delegable power	above, I gram my agent the following powers (here you ers including, without limitation, power to make gifts, name or change beneficiaries or joint tenants or revoke terred to below):
Specific to the refinance of proper	ty known as: 7911 West Raccher,
	Norwood Park, L 60656
	<u> </u>
	——————————————————————————————————————

(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.)

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.)



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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:)** 

(X) This power of attorney shall become effective upon execution hereof
(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).
(X) This power shall terminate on: after the funding of this refinance closing with Park National Bank
and recording of all partinent documents
(insert a future date or even' 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 FOI LO'VING PARAGRAPH.)

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, 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 lice ased physician.

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YO'JR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, PUT 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 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

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. 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.

Signed Whajle hekewed (principal) Mihajlo Sretkovic

(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)		•	the signatures of my ors) are correct.	y agent
(agent)				(principal)
(success	sor agent)			(principal)
(success	sor agent)			(principal)
(THIS POWER OF ATTORNEY W SIGNED BY AT LEAST ONE ADI				
State of ) SS. Country of )	Republic of Ser City of Belgrad Embassy of the States of Ameri	le ) United )	SS:	
The undersigned, a notary public in , known to me to be the same personattorney, appeared before me and in the instrument as the free and volunt certified to the correctness of the signal.	whose name is e additional with ary act of the pr	subscribed as ness in person a rincipal, for the	principal to the fore and acknowledged s uses and purposes	going power of igning and delivering
Seal	4		MAY 4, 200  Motary Public	1m
My commission expires: INDEFINIT		C	arolya M. Gori Consul	man
The undersigned witness certifies the Mihajlo known to me to be the same person attorney, appeared before me and the instrument as the free and voluntary	Sretkovic whose name is a e notary public a	and acknowled	lged signing and del	ive ing the
believe him or her to be of sound m  Dated MAY 4, 2007 (SEAL)	ind or memory.	• /		Co
John richert Bepa.	Witness			
State of Country of Republic of Serbia City of Belgrade Embassy of the Uni States of America	ted ) SS	S:		
The undersigned notary public in arknown to me to be the same person attorney, appeared before me in per	whose name is s	subscribed as v	vitness to the forego	SERA DOVANOVIC ing power-of-
1/M	1			

Carolyn M. Gorman Consul

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#### LEGAL DESCRIPTION:

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ORIGINAL LOT 29 IN WITWICKI'S SECOND ADDITION TO GLEN EDEN ESTATES, BEING A SUBDIVSION OF PART OF THE NORTHEAST QUARTER OF SECTION 11 AND PART OF THE NORTHWEST OUARTER OF SECTION 12, ALL IN TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED APRIL 26, 1956 AS