### **UNOFFICIAL COPY**

## **Limited Power of Attorney**

(with Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM 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. YOU MAY SPECIFY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ANY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

ANYTHING ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ANYTHING ANYTHING ANYTHING ANYTHIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.
TO ALL PERSONS, be it known, that I, Gabriela Arevalo.
of 3645 S. 54th Ave. Cicero, II, 60804
as Principal, do hereby make and grant a limited and specific power of attorney to
of 3520 S. 58th Ave. Cicero, IL 60804
and appoint and constitute said individual as my attorney-in-fact.
My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally: all with full power of substitution and revocation in the presence:  (Describe specific authority)
loan on the properity locate on 3639s. 54th Ave. Cicero, IL
60804
The authority granted shall include such incidental acts as are reasonably required or necessary to carry out and perform the specific authorities and duties stated or contemplated herein.
My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interests as my attorney-in-fact deems advisable, and the reupon ratify all acts so carried out.
I agree to reimburse my attorney-in-fact all reasonable costs and expenses incurred in the fuiri ment of the duties and responsibilities enumerated herein.
Special durable provisions:
This power of attorney shall not be affected by subsequent incapacity of the Principal. This power of attorney may to evoked by the Principal giving written notice of revocation to the attorney-in-fact, provided that any party relying in good faith upon this power of attorney shall be protected unless and until said party has either a) actual or constructive notice of revocation, or b) upon recording of said revocation in the public records where the Principal resides. Furthermore, upon a finding of incompetence by a court of appropriate jurisdiction, this Power of Attorney shall be irrevocable until such a time as said court determines that I
am no longer incompetent.  Other terms:
Doc#: 0719942106 Fee: \$50.00  Eugene "Gene" Moore RHSP Fee:\$10.00  Cook County Recorder of Deeds  Doc#: 0718/2007 10:38 AM Pg: 1 of 3

BOX 333-CTT

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# **UNOFFICIAL COPY**

Signed under seal this	day of	, 20
Signed in the presence of:	. /	
Witness: Mahall Mirelo	Principal: Labriely Ir	and la
132	Time party (	
Witness: Yours		
State of 1610015	. 1	
County of Cook	. }	
	$\wedge$	
On JUNE 14 2007	before me, Alexander treami	
personally known to my (or proved to me on the	pasis of satisfactory evidence) to be the person whose name is s	, , , , , , , , , , , , , , , , , , ,
to the within instrumer, and acknowledged to me	e that he/she executed the same in his/her authorized capacity,	and that by
his/her signature on the in trument the person, or	the entity upon behalf of which the person acted, executed the	instrument.
WITNESS my hand and official sean		
Signature: Meal Views		
$\Pi$	AffiantKnown_ <i>V</i>	Produced ID
	Type of ID	(Seal)
		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
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	NOTARY PUBLIC - STATI	E ÓFILLINOIS 🔰
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CICERO, IL 6080	4	C
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0719942106 Page: 3 of 3

### **UNOFFICIAL COPY**



#### CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1409 008386464 CL STREET ADDRESS: 3639 S. 54TH AVENUE

CITY: CICERO COUNTY: COOK

TAX NUMBER: 16-33-311-020-0000

#### LEGAL DESCRIPTION:

LOT 28 IN BLOCK 5 IN CALVIN F. TAYLOR'S SUBDIVISION OF THE EAST 1/2 OF THE SEC.
AN, IN

COOK
COUNTY CLORES

OFFICE SOUTHWEST 1/4 OF SECTION 33, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MEPIDIAN, IN COOK COUNTY, ILLINOIS.

LEGALD

LH3

07/06/07