

ATIC# 1649972 2064



Doc#: 0724726146 Fee: \$30.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 09/04/2007 02:16 PM Pg: 1 of 4

ILLINOIS STATUTORY SHORT FORM
LIMITED POWER OF ATTORNEY FOR PROPERTY

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE TO 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 A POWER IS EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM. 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 NO 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. 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.)

This Power of Attorney made this 7th day of August 2007

1. I, Emma L. Swanson, of Chicago Heights, Illinois, hereby appoints Robert Swanson, my agent of Chicago Heights, Illinois as my attorney in fact (my "Agent") to act for me 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 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 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 b. Borrowing transactions c. all other property powers and transactions

(LIMITATIONS 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):

3. In Addition to the powers granted above, I grant my 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):

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Execute any and all documents relative to the purchase of the property commonly known as: 225 Mayfair Place, Chicago Heights, Illinois which is legally described on Exhibit "A" attached hereto and made part hereof, including but not limited to notes, mortgages and any other documents such as Loan Application, closing statements, escrow disbursements and settlement statements prepared by Wells Fargo Bank, N.A.

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS NECESSARY TO ENABLE THE AGENT TO PROPERTY 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 successor) named by me who is acting under this power of attorney at the time of reference.

(YOUR AGENT SHALL 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. This power of attorney shall become effective on the date of execution.

7. This power of attorney shall terminate on September 30, 2007

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAMES(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

8. If any Agent named by me shall die, become legally disabled, resign or refuse to act, I name the following (each to act alone successively, in the order named) as successor(s) to such Agent: None

9. If a guardian of my person is to be appointed, I nominate the following to serve as such guardian: None at this time

10. If a guardian of my estate (my property) is to be appointed, I nominate the following to serve as such guardian: None at this time

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11. 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 Emma L. Swanson
Principal - Emma L. Swanson

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

The undersigned witness certifies that Emma L. Swanson, 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 and acknowledge 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/her to be of sound mind and memory.

Dated: 8/7/07, 2007

Barbara Stoll
Witness -

State of Illinois

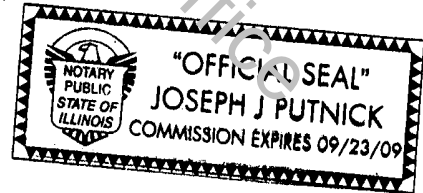
S.S. 352-46-6693

County of Cook

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Emma L. Swanson personally known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, and BARBARA STOLL, (Witness) in person, appeared before me this day in person, and acknowledge that they signed and sealed and delivered the said instrument as the free and voluntary act for the uses and purposes therein set forth.

Given under my hand and official seal, this 7 day of Aug, 2007

Joseph Putnick
Notary Public



MAIL to:

This document was prepared by Joseph J. Putnick 161 W. Harrison St., Chicago, Il.

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EXHIBIT A

LEGAL DESCRIPTION

Legal Description: LOT 147 IN OLYMPIA TERRACE UNIT NO. 4, A SUBDIVISION OF PART OF THE WEST 1/2 OF THE NORTHEAST 1/4 AND PART OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 17, TOWNSHIP 35 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

Permanent Index #'s: 32-17-227-001-0000 Vol. 0012

Property Address: 225 Mayfair Place, Chicago Heights, Illinois 60411

Property of Cook County Clerk's Office