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Doc#: 0725041106 Fee: \$32.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds
Date: 09/07/2007 02:30 PM Pg: 1 of 5

After recording return to:

Rosalie Ragona 8233 W. Elmore Avenue Niles, IL 60706

Prepared by: Bonnie M. Keating Attorney at Law 6230 N. Leona Avenue Chicago, 1L 60646

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY

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 THE 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 TO KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWER OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM, BUT NOT CO-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 POWER GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE TO YOUR AGENT ARE EXPLAINED MORE JULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART (REPRINTED IMMEDIATELY FOLLOWING THIS FORM). THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT MAY DESIRE. UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

POWER OF ATTORNEY, made this 30 day of August, 2007:

I, ROSALIE RAGONA, of 8233 W. Elmore Avenue, Niles, IL 60706 he eby appoint SARAH ZIMMERMAN as my attorney in fact (my "agent") to act for me and in my name (in ar, way I could act in person) with respect to the following powers, as defined in Section 3-4 of the "St tuto y 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 2 or 3 below:

(YOU MAY STRIKE OUT ANY ONE OF 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 LINE THROUGH THE TITLE OF THAT CATEGORY)

a. Real Estate Transaction concerning purchase of residential real estate and execution of all mortgage documents (including, but not limited to notes, mortgages and related documents) to secure financing with Citibank including documents generated at Mercury Title Insurance Company to acquire title, secure the collateralization, and close the transaction to purchase property located at 315-345 W. Northwest Highway, Palatine, Illinois.

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- Financial institution transactions b.
- Stock and bond transactions c.
- Tangible personal property transactions d.
- Safe deposit box transactions e.
- Insurance and annuity transactions f.
- Retirement plan transactions g.
- Social security, employment and military service benefits, including medicare.
- Tax matters
- Claims and litigation j.
- Commodity and option transactions k.
- **Business operations**
- Borrowing transactions m.
- Estate transaction
- All other property powers and transactions.

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

- 2. The powers grant debove 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 ond tions 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):

To execute any document necessary to acquire and collateralize with Citibank the property located in Palatine, IL.

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN TH'S 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 (7 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 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 ENDING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:

6. () This power of attorney shall become effective on execution, OR 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. () This power of attorney shall terminate on my death, OR insert a future date or event, such as court determination of you. disability, when you want this power to terminate prior to your death
This power of attorney will terminate upon the closing of the transaction.

8. If any agent named by me shal' 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 should 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 AFPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. (STRIKE OUT PARAGRAPH OF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN).

- 9. If a guardian of my estate (my property) is to be appointed, I noming 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 jull import of this grant of powers to my agent.

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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.)

SARAH ZIMMENMAN, Agent

Rosalie Rogono

STATE OF ILLINOIS

)) SS.

COU? TY OF COOK

The undersigned, a notary public in and for the above county and state, certifies that ROSALIE RAGONA, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me in person and acknowledged signing and delivering this instrument as the free and voluntary act of the principal, for the uses and purposes set forth.

DATED:

 $30 \text{ Ox}_{.20}$

Donnie Martiney Heating NOTARY PUBLIC

The undersigned witness certifies that ROSALIE RAGONA 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 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.

n..............................

8-30-07

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_Witness

Prepared by:

Bonnie M. Keating Attorney at Law 6230 N. Leona Avenue Chicago, 1L 60646 (773) 763 8095 NOTARY PUBLIC BONNIE MARTINEZ-KEATI G

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LOT 2 IN KUNTZE'S FIRST INDUSTRIAL ADDITION TO PALATINE, A SUBDIVISION OF PART OF THE NORTHWEST 1/4 AND PART OF THE NORTHEAST 1/4 OF SECTION 15, TOWNSHIP 42 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN #: 02-15-200-012-0000

Commonly known as: 315-345 W. NORTHWEST HIGHWAY Proberty of Cook County Clark's Office

PALATINE, Illinois 60067