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Doc#: 0807922112 Fee: \$44.00 Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 03/19/2008 02:48 PM Pg: 1 of 5

Power of A.

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18.7 Buckley Drive
Schord, IL 6110

Control Office

0807922112 Page: 2 of 5

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

NOTICE: 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 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 KEEP A KECORD 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 TEPMINATES IT, YOU 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 "SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART.

POWER OF ATTORNEY, made this Hay of February, 2008.

I, Steve Klebosits and Thomas Hyland, incividually and as Manager of Value Right, LLC, of Chicago, Illinois hereby appoint my excerney, Anthony Campanale, with offices at 19 S. LaSalle Street, Chicago, IL 60603, as my autorney-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 pay limitations on 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)
Categories

- a: Real Estate Transactions, including the authority to execute deeds for the property located at 5741 S. Justine, Chicago, IL
- b: Financial Institution Transactions
- e: Stock and Bond Transactions
- 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

0807922112 Page: 3 of 5

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- i: Tax matters
- j: Claims and litigations
- k: Commodity and option transactions
- l: Business operations
- m: Borrowing transactions, including the authority to execute notes and mortgages
- 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)

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):

NONE

In addition to the powers granted above, I grant my agent the following powers (here you may add any other delagable powers including, without limitation, power to make gifts, exercise powers of appointment. The or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below):

NONE

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 ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

5. My agent shall be entitled to reasonable compensation for serviced rendered as agent under this power of attorney.

(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AN IN ANY MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME THE 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:)

0807922112 Page: 4 of 5

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Age	nt —	<u>Frincipar</u>
		the Specimen signatures of my agent and successors of my agent are correct Principal
CON	4PLETI	E THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)
INIC	LIDES	OR AGENTS TO PROVIDE SPECIMEN SIGNATURES BELOW. IF YOU SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST
(YO	U MAY	, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND
Thor	nas Hyl	and, individually and as Manager of Value Right, LLC
(
Steve	Klebo	sits, individually and as Manager of Value Right, LCC
	uus g	grant of powers to my agent.
10.	I am	fully informed as to all the contents of this form and understand the full import of grant of powers to my agent.
9.		ENTIONALLY OMITTED
PAR	AGRAF	PH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.
A PP	MTMC	T WILL APPOINT YOU AGENT IF THE COURT FINDS THAT SUCH ENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT
ARE	NOT R	FOLURED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH.
(IF Y	OU WI	SH TO NAME YOU AGENT AS GUARDIAN OF YOUR ESTATE, IN THE OURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT
physi		
while	the ner	son is a minor or an adjudicated incompetent or disabled person or the person is a property and intelligent consideration to business matters, as certified by a licensed
	N/A For p	exposes of this paragraph 8, a person shall be considered to be incompetent if and
	name	d) as successor(s) to such agent:
8.	If any	agent named by me shall die, become incompetent, resign or refuse to accept the of agent, I name the following (each to act alone and successively, in the order
(IF YO	OU WIS RESS(E	SH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND (S) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)
7.	<u>X</u>	This power of attorney shall terminate on March 10, 2008.
6.	<u>X</u>	This power of attorney shall become effective on March 6, 2006.

0807922112 Page: 5 of 5

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	Deinaina
Agent	——— Principal
Agent	· · · k

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

The undersigned witness certifies that Steve Klebosits, and Thomas Hyland, each as Manager, known to me to be the same persons whose names are 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 principals, for the uses and purposes therein set forth. I believe them to be of sound mind and memory.

Dated: March		2008.				
	1. 40		<u> </u>	•	174	
Witness			0)x	•		

STATE OF ILLINOIS } SS. COUNTY OF COOK }

I, the undersigned, a Notary Public in and for the County of Cook, and residing in the said County, in the State aforesaid, DO HEREBY CELTIFY, that Steve Klebosits and Thomas Hyland, personally known to me to be the same persons whose names are subscribed as principal to the foregoing power of attorney appeared before me and the additional witness this day in person, and acknowledged that they signed, sealed and delivered the said Instrument as a free and voluntary act of the principals, for the uses and purposes the cin set forth and certified to the correctness of the signatures of the agent.

GIVEN under my hand and notarial seal, on March 7, 2008

This document prepared by and please mail to:

Anthony Campanale, Anthony Campanale & Associates, 19 S. LaSalle St. #1500, Chicago, IL 60603, 312-641-2233

FORTILL A CICESON Notary Public State of Illinois My Commission Exp. 05/08/2010