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Doc#: 0812942167 Fee: \$48.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 05/08/2008 02:02 PM Pg: 1 of 7

SOF A. Cook County Clerk's Office POWER OF ATTORNEY

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

ONOTICE: 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 DOCUMENT AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF ICEINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER I'AS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS FOR ER 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 TUROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOUR VE 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 DOCUMENT IS A PART (SEE PAGES 5-7 OF THIS DOCUMENT). THAT LAW EXPRESSLY PERMITS THE USE OF ANY LIFTERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS DOCUMENT THAT YOU DO NOT UNDERSTAND. YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO TOU.)

POWER OF ATTORNEY made this 20th day of Upril 1)	0 %
appoint James H Miles On of Original Automore in fact (my "agent") to get for me and how more in any m	hereby, as my
attorney-in fact (my "agent") to act for me and my name (in any way reould the following powers, as defined in Section 3-4 of the "Statutory Short Form Pow Law" (including all amendments), but subject to any limitations on or additions enter a paragraph 2 or 3 below:	t in person) with respect to

(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. (A. .

Real estate transactions. (a) Tax matters. (i) (b) Financial institution transactions. Claims and titigations. (i) Stook and bond transactions. (c) (k) Commedity and option transactions (d) Tangible personal property transactions. Business operations. $\{i\}$ Safe deposit box transactions. (e) (m)Berrowing transactions. **(f)** Insurance and annuity transactions. Estate immanetions. (n)(g) Retirement plan transactions. (o) All other property powers and (h) Social Security, employment and transactions.

military service benefits.

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(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 there 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):
(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.)
4. My agent shall have the right by written in trument to delegate any or all of the foregoing powers involving discretionary decision-making to any person of rersons whom my agent may select, but such delegation may be amended or revoked by any agent (including my 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 PLASONABLE 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 emitted to reasonable compensation for services rendered as a gent under this power of attorney.
(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AND IN LAY 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. (D) This power of attorney shall become effective on whom Algring
7. (Bl) This power of attorney shall terminate on the transfer to the transfer of the transfer
Of property dealest at 15 1 W dell'st
5/30/08/

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

8. office of agent, to such agent:	If any agent named by I name the following (ca	me shall die, ch to act alone e	become incompe and successively,	tent, resign or re in the order nam	efuse to accept the ed) as successor(s)

First Successor Agent:	
Second Successor Agent:	

For purposes of this paragraph 8, 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 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 A POINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

- 9. If a guardian of my estat: (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.
- 10. I am fully informed as to all the concents of this form and understand the full import of this grant of powers to my agent.

Signed

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CYOU 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.)

Specimen signatures:	I certify that the signatures of my agent and successor are correct.
Agent	Principal Principal
First Successor Agen	
(THIS POWER OF ATTORNE) WILL NOT B FORM BELOW.)	BE EFFECTIVE UNLESS IT IS NOTARIZED, USING THE
STATE OF ILLINOIS)	
COUNTY OF COOK) The undersigned, a notary public in any who is known.	d for the above county and state, certifies that Daul. In to me to be the same person whose name is subscribed as
principal to the foregoing power of altorney, as	speared before me in person and acknowledged signing and arry act of the principal, for the uses and purposes therein set
Dated: 4/26/, 200 8	Cluby W. K. unty
OFFICIAL SEAL CAROLYN M. GRASTY Notary Public - State of Illinois My Commission Expires May 10, 2011	

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The undersigned witness cere fies that Bauy La same person whose name is subscribed as principal to the spregoing 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 the principal to be of sound mind and memory.

Dated:_

OFFICIAL SEAL CAROLYN M. GRASTY Notary Public - State of Illinois My Commission Expires May 10, 2011

aver Modaly DIANA MCHAIN WITHESS

CAROLYN GRASTY NOTARY

This document was prepared by:

Thus on leaf & Gui where # 4000 Chicaro It Golds

Chicaro It Golds

Office

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STREET ADDRESS: 1244 WEST LILL AVE FICIAL COPY

COUNTY: COOK CITY: CHICAGO

TAX NUMBER: 14-29-315-072-0000

LEGAL DESCRIPTION:

LOT 22 IN DAVID R. LEWIS RESUBDIVISION OF PART OF LEWIS'S SUBDIVISION OF LOTS 3 AND 4 AND THAT PART OF LOT 13 LYING EAST OF THE RAILROAD RIGHT OF WAY AND SOUTH OF THE NORTH LINE OF LOT 3 EXTENDED WEST TO SAID RAILROAD RIGHT OF WAY IN THE COUNTY CLERK'S DIVISION OF BLOCK 43 IN SHEFFIELD'S ADDITION TO CHICAGO IN SECTION 29 TOWNSHIP 40 NORTH, RANGE 14 IN COOK COUNTY, ILLINOIS ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 15, 1904 AS DOCUMENT 3592681 IN BOOK 88 OF PLATS PAGE 7 IN COOK COUNTY, ILLINOIS.

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