Doc#: 0814149039 Fee: \$44.50 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds

Date: 05/20/2008 11:45 AM Pg: 1 of 5

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY DURABLE POWER OF ATTORNEY

ATS#56336

(The place above for Recorders use only)

Legal Description: See at the Legal Description

This Power of Attorney is being created for the purpose of purchase the property located at:

Street Address: 8950 S. 84th Court City Hickory Hills, IL 60457

Permanent tax index #: 23-02-104-014-0000

(The above can be deleted if real estate not subject to the Pover of Attorney.)

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORN; 'S TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WIJCH 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 DOESNOT 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 ACTIONS TAKEN AS A AGENT. A COURT CAN TAKE AWAY THE POWERS, OF YOUR AGENT IF IT FINDS THE AGENT NOT ACTING PROPERLY. YOU MAY NAME SUCCESSORAGENTS UNDER THIS FORM BUT NOT AS COUNTIL 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 AFTEN YOU BECOME DISABLED, "STARUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICK THIS FORM). 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.)

POWER OF ATTORNEY made this | S | day of | 2005 | (same day as Effective Date) | day of | (month) | (year)

1. I, <u>Kenneth Stevens</u>, 9350 S. 82nd Ave., <u>Hickory Hills</u>, IL 60457

(insert name and address of Principal (person needing the POA))

hereby appoint: Robert C.J. Reilly, Jr., 1611 W. 187th St., Homewood, IL 60430

(insert name and address of Agent (person who will be signing on behalf of Principal))

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"

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(including all amendments), but subject to any limitations on or additions to the specific 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) Financial institution transactions.
- (c) Stock and bond transactions.
- (d) Tangible personal property transactions.
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Recrement plan transactions.
- (h) Social Security, employment and military service benefits.
- (i) Tax matters
- (j) Claims and lifigation.
- (k) Commodity and option transactions.
- (l) Business transactions.
- (m) Borrowing transactions
- (n) Estate transactions.
- (o) All other property powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S FOWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICIALLY DESCRIBED BELOW.)

2. The powers granted above shall not include the following powers or shall be modified or limited in the

Not Ar	pplicable					
				7		
appoin	delegable power	rs including, with	nout limitation	nower to make	oowers (here you make giffe, exercise per amend any trust s	
OLCITO						

(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 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.

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(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION AS AGENT.)

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 REVOKATION, 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 INITIALIZING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

(XX) This power of attorney shall become effective on

Ine closing date for the purchase above.

(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. (XX) This power of attorney shall terminate on

Completion of the closing above.

(insert a date or event, such as a court determination of your disability, when you want this power to terminate prior to your death)

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

8. If any agent named by me shall 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:

Not Applicable

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 NAVE YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDED THAT ONE SHOULD BE APPOINT, ED, 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 APPOINTMENT 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 estate (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 contents of this form and understand the full import of this grant of powers to my agent.

Signed: XX

(principal)

(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)

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Specimen signatures of agents (and successors)	I certify that the signatures of my agent (and successors are correct)
XX	the delication of the second o
(agent)	XX
(ugcin)	(principal)
XXN/A	XX
(successor agent)	(principal)
Hamon Stevens) Witness: Signature	- ,
Ramona Stevers	
Witness: Printed Name	
(THIS POWER OF ATTORNLY WILL NOT BE EFFECTIVE U.	NLESS IT IS NOTORIZED, USING THE FORM BELOW.)
State of Illinois)	,
County of Cook) ss.	
I, the undersigned a Notary Public in and for the fate County Kenneth Stevens	in the State of aforesaid, Do Hereby Certify that
Principal to the foregoing Power of Attorney, appeared be for acknowledged signing and delivering the instrument as the	me to be the same person whose name is subscribed as
purposes therein set forth.	Of the second
Dated: April 18, 2008	Met // Malls/
OFFICIAL OFFI	Notary Signature
OFFICIAL SEAL ROBERT C J REILLY JR	
NOTARY PUBLIC - STATE OF ILLINOIS	11/28/03
MY COMMISSION EXPIRES:11/28/08	Commission Expi es
was a second sec	74,
(Space for Notary Seal above)	'5
Prepared by and when Recorded mail to: Name: Robert C.J. Reilly, Jr.	0,50
Street Address: 1611 W. 187th St.	750/jic
City, St, Zip: Homewood, IL 60430	

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ALTA Commitment 1982 Schedule A

Stewart Title Guaranty Company

SCHEDULE A

File No.: 56336

LOT 12 IN HICKORY HIGHLANDS, BEING A SUBDIVISION OF THE SOUTH HALF OF THE SOUTH HALF OF THE NORTH HALF OF THE SOUTH HALF OF THE EAST HALF OF THE NORTHWEST QUARTER (EXCEPT THE EAST ONE-EIGHTH (1/8) THEREOF) OF SECTION 2, TOWNSHIP 37 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY, ILLINOIS, ON AUGUST 3, 1962 AS DOCUMENT NUMBER 2048079, AND REREGISTERED ON NOVEMBER 5, 1962, AS DOCUMENT NUMBER 2064232.

Address of Property (for identification purpores cally):

	SOUTH 84TH COURT KORY HILLS, Illinois 60457	
Pin: 23-02-104-014		C/O/X; O/X;
UNDERWRITER	ISSUE AGENT	CLOSING AGENT
Stewart Title Guaranty 1980 Post Oak Blvd., Suite 800 Houston, Texas 77056	Law Offices of Peter Murphy, 11800 S. 75th Ave, Suite 101, Palos Heights, IL 60463	Absolute Title Services 2227 Hammond Drive Schaumburg, IL 60173

Schedule A of this Policy consists of 4 page(s)

ISSUED BY: Law Offices of Peter Murphy, 11800 S. 75th Ave, Suite 101, Palos Heights, IL 60463