

# UNOFFICIAL COPY

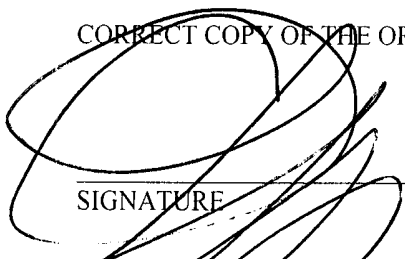


Doc#: 0922633064 Fee: \$46.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 08/14/2009 11:43 AM Pg: 1 of 6

M

I, Cheryl Brady, OF CHICAGO TITLE INSURANCE COMPANY,  
DO HEREBY CERTIFY THAT THE Power of Attorney DATED  
7/7/09, MADE BETWEEN Silvio Visconti  
AND Maria Visconti

WAS PRESENTED TO CHICAGO TITLE FOR RECORDATION. FURTHER, THAT SAID  
Power of Attorney HAS BEEN LOST AND THAT THE ATTACHED IS A TRUE AND  
CORRECT COPY OF THE ORIGINAL.

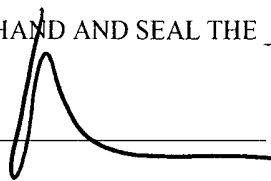
  
SIGNATURE

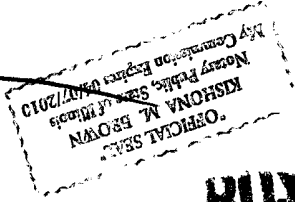
STATE OF ILLINOIS  
COUNTY OF Cook

I, THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY IN THE STATE  
AFORESAID, CERTIFY THAT Cheryl L. Brady, OF  
CHICAGO TITLE INSURANCE COMPANY, PERSONALLY KNOWN TO ME TO BE THE SAME  
PERSON WHOSE NAME IS SUBSCRIBED AND SWORN TO IN THE FOREGOING INSTRUMENT,  
APPEARED BEFORE ME THIS DATE IN PERSON AND ACKNOWLEDGED THAT HE/SHE  
SIGNED AND DELIVERED THE SAID INSTRUMENT AS HIS/HER OWN FREE AND  
VOLUNTARY ACT FOR THE USE AND PURPOSE THEREIN SET FORTH.

GIVEN UNDER MY HAND AND SEAL THE 12th DAY OF August, 2009.

NOTARY PUBLIC





**BUX 333-CP**



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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 RECORD 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 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" OF WHICH THIS FORM IS A PART (SEE THE BACK OF 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 7<sup>th</sup> day of July, 2005.

1. I, SILVIO VISCONTI of Chicago, IL

hereby appoint: MARIA VISCONTI of Chicago, IL

as my attorney-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 any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

"THE SIGNATURES OF THE PARTIES EXECUTING THIS DOCUMENT ARE COPIES AND ARE NOT ORIGINAL SIGNATURES."

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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) ~~Retirement plan transactions.~~
- (h) ~~Social Security, employment and military service benefits.~~
- (i) ~~Tax matters.~~
- (j) ~~Claims and litigation.~~
- (k) ~~Commodity and option transactions.~~
- (l) ~~Business operations.~~
- (m) Borrowing transactions.
- (n) ~~Estate transactions.~~
- (o) All other property powers and transactions.

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):

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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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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.~~

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

6. This power of attorney shall become effective on July 7, 2009.

7. This power of attorney shall terminate on July 31st, 2009 ~~July, 10th 2009~~ *JK*

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

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:~~

\_\_\_\_\_  
For purposes of this paragraph, 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.

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 *Silvio Visconti*  
SILVIO VISCONTI

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Specimen signatures of agent (and successors)

I certify that the signatures of my agent (and successors) are correct.

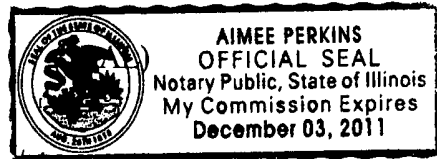
\_\_\_\_\_  
State of ILLINOIS )  
County of COOK ) SS.  
\_\_\_\_\_ )

The undersigned, a notary public in and for the above county and state, certifies that Silvio Viscanti, 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 additional witness in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth, (and certified to the correctness of the signature(s) of the agent(s)).

Dated: 07/07/09

Aimee Perkins  
Notary Public

My commission expires 12/03/11



The undersigned witness certifies that Silvio Viscanti, 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.

Dated: 07/07/09

[Signature]

This document was prepared by:

Aimee Perkins <sup>mail To:</sup>  
Getco, LLC  
Chicago, IL 312-676-5522

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## CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1401 008471783 F1  
STREET ADDRESS: 3248 N. HOYNE AVENUE  
CITY: CHICAGO COUNTY: COOK  
TAX NUMBER: 14-19-326-051-0000

**LEGAL DESCRIPTION:**

LOTS 5 AND 6 IN BLOCK 1 IN SUBDIVISION OF BLOCK 47 IN THE SUBDIVISION OF SECTION 19, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN (EXCEPT THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4 OF THE SOUTHEAST 1/4 OF THE NORTHWEST 1/4 AND THE EAST 1/2 OF THE SOUTHEAST 1/4 THEREOF) IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office