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ILLINOIS STATUTORY SHORT FORM FOWER 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



Doc#: 1015949047 Fee: \$62.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds
Date: 06/08/2010 02:33 PM Pg: 1 of 3

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 Section 3-4 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 dated

| | I KIMBERLY A | 17 | / ID CCLINIED | 0001 | DDIMDOCE | HICKODY | THILL | II / | 50457 |
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(insert name and address of principal)

hereby appoint: MICHAEL 7 KURSCHNER, 9091 PRIMROSE, HICKORY HILLS, IL 60457

(insert name and address of agent)

as my ATTORNEY-IN-FACT (my 'ACENT") 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 spec feed powers inserted in paragraph 2 or 3 below

[You must strike out any one or more of the fello ving 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.
- (f) Insurance and Annuity
- (k) Commodity and Option Transactions

- (b) Financial Institution Transactions.
- (g) Retirement Man Transactions.
- (l) Business Operations.

- (c) Stock and Bond Transactions.
- (h) Social Security Employment and
- (h) Social Security Employment and Military Service Benefits.
- (m) Borrowing Transactions

- (d) Tangible Personal Property Transactions.
- (I) Tax Matters.

Transactio is.

(n) Estate Transactions.

- (e) Safe Deposit Box Transactions.
- (j) Claims and Litigation.
- (o) All Other Property Powers and Transactions.

[Limitations on and additions to the Agent's powers may be included in this Power of Attomey 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 in the sale of particular stock or real estate or special rules on borrowing by the Agent):

Any and All documents relating to the purchase of 703 Emil Street, Lemont, IL

| | 60439 | Ux |
|------------------------|--|-------------------|
| | | 1/0- |
| | | |
| ncluding, without limi | powers granted above, I grant my Agent the foltation, power to make gifts, exercise powers o cally referred to below): | |
| | | |
| | | |
| | | |

[Your Agent will have authority to employ other persons as necessary to enable the Agent to property 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 or reference.

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| [Your Agent will be entitled to re imburgement for all reasonable expenses ficulted in a sentence if you do not want your Agent to also be on titled to reasonable companiation to | ting ander ting Power of Attorney. Strike out the next r services a Agent] | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| 5. 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 duration is made by initialing and completing either (or both) of the following:] | | | | | | | | | |
| 6. () This Power of Attorney shall become effective on May 20, 2010 | | | | | | | | | |
| 7. () This Power of Attorney shall terminate on <u>August 01, 2010</u> | | | | | | | | | |
| [If you wish to name successor Agents insert the name(s) and address(es) of such success | or(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: | | | | | | | | | |
| For purposes of this program ph 8, a person shall be considered 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 Ager t as Guardian of your estate in the event a court decides that one should be appointment, you may, but are not required, do so by retaining the for owing paragraph. The court will appoint your Agent if the court finds that such appointment will serve your best interests and welfare. Strike of 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: Sig | | | | | | | | | |
| [Principal] [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 certification approximate the signature of the agent(s).] | | | | | | | | | |
| | s of my Agent (and Successors) are correct. | | | | | | | | |
| Agent | Principal | | | | | | | | |
| Successor Agent | Principal | | | | | | | | |
| Successor Agent | Principal | | | | | | | | |
| [This Power of Attorney will not be effective unless it is notarized, using the form below. | OFFICIAL SEAL | | | | | | | | |
| State of Illinois | NOTALY PLIM IC - STATE OF ILLINOIS | | | | | | | | |
| ss: County of Cook | MY CON MISSI IN EXPERIENCEMENT | | | | | | | | |
| The undersigned, a Notary Public in and for the named county and state, certifies that Kimberly A. Kurschner known to me to be the same person whose name is subscribed as Principal to the foregoing Power of Attorney, appeared before me in pe son 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: 5 30 10 | | | | | | | | | |
| [seal] Notary Public 9 20 11 | | | | | | | | | |
| The undersigned witness certifies that | known to me to be the same before me and the notary public and acknowledged uses and purposes there in set forth. I believe him or witness | | | | | | | | |
| Document prepared by information Carolyn Baca 8240 W. 119th Street Palos Park, IL, 60464 | (The above space for Recorder's use only) | | | | | | | | |

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[This page is not part of official statutory form. It is only for the Agent's use in recording this form when necessary for Real Estate Transactions.}

For the premises commonly known as 703 Emil Street, Lemont, IL 60439

Permanent Index Number(s): 22-20-438-042 and 22-20-438-043

Lots 32, 33 and 34 in Boulevard Heights Subdivision of the East ½ of the Southeast ¼ of Section 20, Township 37 North, Range 11, East of the Third Principal Meridian, in Cook County, Illinois.

Proberty of Cook Colling Clark's Officent to:

[The name and address of the person preparing this form should be inserted if the Agent will have the power to convey any interest in Real Estate.

This instrument was prepared by:

Carolyn Baca

8240 W. 119th Street Palos Park, IL, 60464

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