

Doc#: 1028148130 Fee: \$40.00

Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 10/08/2010 03:04 PM Pg: 1 of 3

Statutory Durable Power of FOR Attorney

Lester Jenkins Sr.

Prepared By the Offices of C+C Dinancial Services INC 1701 South 15th arenne, suite 205 Maywod, IL 60/53 608 3344-4961 NadiNA R. ESper

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UNOFFICIAL COPY

STATUTORY DURABLE POWER OF ATTORNEY

I, Lester Jenkins Sr. of 220 Englewood Avenue, IL 60104, appoints Jowanna Jenkins, 220 Englewood, Avenue, Bellwood, IL 60101, as my agent (attorney-in-fact) to act for me in any lawful way with respect to all of the following powers listed below: Real property transactions; Tangible personal property transactions; Stock and bond transactions; Commodity and uption transactions; Banking and other financial institution transactions; Business operating transactions: Insurance and annuity transactions; Estate, trust, and other beneficiary transactions; Claims and litigation; Personal and family maintenance; All Credit Card Transactions; Benefits from social security, Medicare, Medicaid, or other governmental programs or civil or military service; 75 Retirement plan transactions; Tax matters. X I grant my agents (attorney in fact) the power to apply my property to make gifts, except that the amount of a gift to an individual may not exceed the amount of annual exclusions allowed from the federal gift tax for the calendar year of the gift. ON THE FOLLOWING LINES I GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO MY AGENT. N/<u>A</u>

Initialed For Authenticity

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THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED.

This power of attorney is not affected by my subsequent disability or incapacity.

I agree that any third party who receives a copy of this document may act under it. Revocation of the durable power of attorney is not effective as to a third party until the third party receives actual notice of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney.

If any ager named by me dies, becomes legally disabled, resigns, or refuses to act, I name the following (each to act alone and successively, in the order named as successor(s) to that agent: Jow: nna Jenkins, 220 Englewood Avenue, Bellwood, IL 60104.

sontember, 2010 Signed this of County C/

nature of nutary officer)

State of _ ILLINOIS

County of _____COOK

This document was acknowledged before me on

ester Jenkinsse. (name of principal)

(Seal, if any, of notary) _

(Printed name)

ANNTOINETTE R BROWN Notary Public State of Hillinois

My commission expl

OFFICIAL SEA

THE ATTORNEY IN FACT OR AGENT, BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

Initialed For Authenticity