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Doc#: 1122334041 Fee: \$44.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 08/11/2011 10:20 AM Pg: 1 of 5

**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 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. 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 26 day of July 2011

I, Jeffrey Jozwiak, 4250 North Mozart Street, Unit 2S, Chicago, IL 60618 hereby appoint **Christine L. Garner, Tracy Stallworth, Candice DeBray, or Susan Brazas, attorneys for the Law Office of Christine Garner, PC, 185 Buckley Dr., Rockford, IL 61107**, 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:

(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.~~

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- ~~_____ (d) Tangible personal property transactions.~~
- ~~_____ (e) Safe deposit bond 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.~~

(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 (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):

NONE

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):

Specifically authorized to sign any all documents required to close on the short sale of the property listed below including but not limited to real estate contracts, property disclosures, Notes, Mortgages, Waiver of Homestead Rights, short sale approval letters, FHA Amendatory clause, Arms Length Transaction Affidavit and HUD1.

Property: 4250 North Mozart Street, Unit 2S, Chicago, IL 60618

SEE ATTACHED LEGAL DESCRIPTION.

(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.

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE 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.)

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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
Immediately upon the signing of this power of attorney.

7. This power of attorney shall terminate on

July 21, 2012

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

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT 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:

NONE

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 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 person is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

10. 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.

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11. 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: X Jeffrey Jozwiak
Jeffrey Jozwiak

(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 THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS)

Specimen signatures of agent
(and successors)

Christine L. Garner
Agent- Christine L. Garner

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

X Jeffrey Jozwiak
Jeffrey Jozwiak

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED, USING THE FORM BELOW)

State of Illinois)
County of _____) SS.

The undersigned, a notary public in and for the above county and state, certifies that Jeffrey Jozwiak known to be the same person whose name is subscribed as principal to the foregoing power of attorney. Appeared before 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 principal for the

Dated: 07/26/11
My Commission Expires 01-07-2013

Teri Batts (SEAL)
Notary Public, State of Illinois
Cook County
My Commission Expires 01-07-2013

The undersigned witness certifies that Jeffrey Jozwiak, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me 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: July 26, 2011

Christina Thielman (SEAL)
WITNESS

(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE.)

This document was prepared by: Christine L. Garner, Attorney at Law,
mail to. 185 Buckley Dr., Rockford IL, 61107

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EXHIBIT A LEGAL DESCRIPTION

PARCEL 1: UNIT NO. 2S IN MOZART PLACE CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: LOTS 3, 4 AND 5 (EXCEPT THE SOUTH 15 FEET THEREOF) IN BLOCK 7 IN ROSE PARK, A RESUBDIVISION OF THE EAST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 13, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED AS EXHIBIT "B" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NO. 0427344069, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS ALL IN COOK COUNTY, ILLINOIS.

PARCEL 2: THE EXCLUSIVE RIGHT TO THE USE OF P-6, A LIMITED COMMON ELEMENT AS DELINEATED ON THE SURVEY ATTACHED TO THE DECLARATION AFORESAID RECORDED AS DOCUMENT NO. 0427344069.

Permanent Index No.: 13-13-314-041-1005

Property Address: 4250 North Mozart Street, Unit 2S, Chicago, IL 60618

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