UNOFFICIAL COPY

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, DISSURSEMENTS

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 MACKIER 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

I, Robert A. Kawczynski, 2222 South 5th Avenue, North Riverside, Illinois 50546 hereby appoint Christine L. Garner, Tracy Stallworth, or Candice DeBray, 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.
- (d) Tangible personal property transactions.



Doc#: 1203444000 Fee: \$46.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds
Date: 02/03/2012 09:47 AM Pg: 1 of 5

1203444000 Page: 2 of 5

UNOFFICIAL COPY

(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.
- (i) -	Claims and litigation.
(k) -	Commodity and option transactions.
- (1) -	Business operations.
(m)	Borrowing transactions.
(n) -	- Estate transactions.
(0) -	All other property powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTOKNEY 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: 2222 South 5th Avenue, North Riverside, Illinois 60546
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.)

1203444000 Page: 3 of 5

UNOFFICIAL COPY

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).	(x) This power of attorney shall become effective
		Immediately upon the signing of this power of attorney.
7	7.	(x) This power of attorney shall terminate on
		1/30/2013
Garage o	£	styre date or event such as court determination of your disability, when you want th

(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 shail 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 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.

UNOFFICIAL COPY

11.	I am fully informed as to all powers to my agent.	Signed: X Robert A. K	and dinderstand the full little to	,
DOMES CE	PECIMEN SIGNATURES E ATTORNEY, YOU MUST	FLOW IF YOU INC	R AGENT AND SUCCESSO LUDE SPECIMEN SIGNAT TIFICATION OPPOSITE TH	IOKES IN THIS
Specimen sign (and successor	natures of agent		nat the signatures nt (and successors) t.	*
Agent- Christ	a L. Munchine L. Garner	Robert A	. Kawczynski	
FORM BELO State of Illino County of County of The undersign the same person and acceptance of the same person	ow) ois) SS. med, a notary public in and formson whose name is subscribe knowledged signing and deligoses therein set forth (and ce	the above county and stand as principal to the forwering the instrument as the triffied to the correctness.	ARY FULL CARRES IN SEAL OF THE	z ynski known to b Appeared before ii
subscribed as and deliverin forth, (and ce	principal to the foregoing po	wer of attorney, appeared and voluntary act of the e signature(s) of the agen	own to the to be the come person and ack principal, for the uses and put(s).	nowledged signin
(THE NAME		ERSON PREPARING T	HIS FORM SHOULD BE INS	SERTED IF THE
	nt was prepared by: Christi	ne L. Garner, Attorney at ckley Dr., Rockford IL, 6	Law,	

1203444000 Page: 5 of 5

UNOFFICIAL COPY

EXHIBIT A LEGAL DESCRIPTION

LOT 25 IN BLOCK 1 IN KOMAREK'S WEST 22ND STREET SECOND ADDITION, BEING A SUBDIVISION OF THE WEST 1/2 OF THE NORTHWEST 1/4 OF SECTION 26, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Permanent Index No.: 15-26-103-023-0000

Property Address: 2222 South 5th Avenue, North Riverside, Illinois 60546

