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Doc#: 1211611027 Fee: \$44.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 04/26/2012 10:11 AM Pg: 1 of 4

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Property of Cook County Clerk's Office

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

POWER OF ATTORNEY made this 9th day of April, 2012, I, **Theodore J. Fisher**, 2031 N. Sedgwick St. Chicago, IL 60614 hereby appoint: **Megan E. Fisher**, 2031 N. Sedgwick St. Chicago, IL 60614 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 - 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 or below:

- (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.

S	Y
P	Y
S	N
SC	Y
INT	Y

Box 334

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In addition to the powers granted above, I grant my agent the following:

The execution of any and all documents pertaining to the mortgage and related note of the real property at 416 West Webster Avenue, Chicago IL 60614.

**416 West Webster Avenue
Chicago, Illinois 60614
MLS# 08001195**

**County: Cook
PIN 14-33-114-019-0000
Lot#13 Canal Trustees Township Range Sect:40-14-43**

Purchase Price: \$1,680,000.

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.

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


- (x) This power of attorney shall become effective on: April 10th, 2012.
- (x) This power of attorney shall terminate on April 14th, 2012.

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:

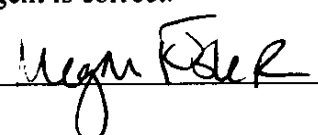
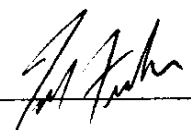
NONE

_____ . For purposes of this paragraph, 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 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. 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.

Dated: 4-9-12 Signed: 
(Principal)

Specimen signatures of I certify that the signatures of my agent agent is correct.

 (agent)  (principal)

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Dated: 4-9-12 Signed: [Signature]
(Principal)

(NOTE: This power of attorney will not be effective unless it is signed by at least one witness and your signature is notarized, using the form below. The notary may not also sign as a witness.)

The undersigned witness certifies that Theodore J. Fisher, 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. The undersigned witness also certifies that the witness is not: (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.

Dated: 4/9/2012 Signed: [Signature]
(Witness)

State of Illinois)
) SS.
County of Cook)

The undersigned, a notary public in and for the above county and state, certifies that Theodore J. Fisher, 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 witness(es) Angela Neal 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: April 09, 2012 Signature [Signature]
Notary Public
My commission expires: 8-16-15



mail to:

This document was prepared by: Theodore J. Fisher, 2031 N. Sedgwick St. Chicago, IL 60614

