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1232126025 Fee: \$80.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 11/16/2012 10:03 AM Pg: 1 of 7

**ILLINOIS STATUTORY** 

DOOP OF POWER OF ATTORNEY FOR PROPERTY County Clerk's Office

Prepared by:

AND

Mail to:

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BOX 334 CTT

1232126025 Page: 2 of 7

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#### NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS

#### STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY.

PLEASE READ THIS NOTICE CAREFULLY. The form that you will be signing is a legal document. It is governed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated "agent" broad powers to handle you: financial affairs, which may include the power to pledge, sell, or dispose of any of your real or personal property, even without your consent or any advance notice to you. When using the Statutory Short Form, you may name successor agents, but you may not name co-agents.

This form does not impose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will agree to do this for you. It is also important to select an agent whom you trust, since you are giving that agent control over your financial assets and property. Any agent who does act for you has a duty to act in good faith for your benefit and to use due care, competence, and diligence. He or she must also act in accordance with the law and with the directions in this form. Your agent must keep a record of all receipts, disbursements, and significant actions taken as your agent.

Unless you specifically limit the period of time that this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your lifetime, both before and after you become incapacitated. A court, however, can take away the powers of your agent if it finds that the agent is not acting properly. You may also revoke this Power of Attorney if you wish.

This Power of Attorney does not authorize your agent to appear in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law in Illinois.

The powers you give your agent are explained more fully in Section 3-4 of the Illinois Power of Attorney Act. This form is a part of that law. The "NOTE" paragraphs throughout this form are instructions.

You are not required to sign this Power of Attorney, but it will not take effect without your signature. You should not sign this Power of Attorney if you do not understand everything in it, and what your agent will be able to do if you do sign it.

Please place your initials on the following line indicating that you have read this Notice:

Principal's initials

1232126025 Page: 3 of 7

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#### ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, RAYMOND M. NGAI (Insert name
and address of principal) hereby revoke all prior powers of attorney for property executed by me and
appoint SHAOLING NGAT
(insert name and address of agent)
(NOTE: You may not name co-agents using this form.)
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 to
Property Law (including all amendments), but subject to any limitations on or additions to the specified
powers inserted in paragraph 2 or 3 below:
(NOTE: You must strike out any one or more of the following categories of powers you do not want your
agent to have. Failule 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 transaction s.
(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.
(I) Business operations.
(m) Borrowing transactions.
(n) Estate transactions.
(i) Claims and ingation. (k) Commodity and option transactions. (i) Business operations. (ii) Borrowing transactions. (iii) Estate transactions. (iii) Calims and ingation. (iii) Business operations.
(NOTE: Limitations on and additions to the agent's powers may be included in unis power of attorney if they are specifically described below.)
ui o opositioally sussitible traight.)
2. The powers granted above shall not include the following powers or shall be mid! Fed or limited in the
following particulars:
(NOTE: 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 a rent.)
***************************************
3. In addition to the powers granted above, I grant my agent the following powers:  (NOTE: Here you may add any other delegable powers including, without limitation, power to make gifts,
(NOTE: 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.)
***************************************

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1232126025 Page: 4 of 7

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(NOTE: 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 paragraph 4, 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.

(NOTE: You agant will be entitled to reimbursement for all reasonable expenses incurred in acting under this power of attraney. Strike out paragraph 5 if you do not want your agent to also be entitled to reasonable compensation for services as agent.)

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

(NOTE: 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 under your death, unless a limitation on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.)

(NOTE: If you wish to name one or more successor agents, insert the name and address of each successor agent in paragraph 8.)

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:

purposes of 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.

(NOTE: If you wish to, you may name your agent as guardian of your estate if a court decides that one should be appointed. To do this, retain paragraph 9, and the court will appoint your agent if the court finds that this appointment will serve your best interests and welfare. Strike out paragraph 9 if you do not want your agent to act as guardian.)

3.7

1232126025 Page: 5 of 7

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- 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.

(NOTE: This form does not authorize your agent to appear in court for	
otherwise to engage in the practice of law unless he or she is a licens practice law in Illinois.)	ed attorney who is authorized to
11. The Notice to Agent is incorporated by reference and included a	as part of this form.
Dated:1.04.23 / 2012	
Signed	
်မျာ incipal)	
(NOTE: This power of attorney will not be effective unless it is signed it	hv at least one witness and vour
	ature is notarized, using the fo m >e'ow. The notary may not also sign as a witness.)
The undersigned witness certifies thatPAXMONDMNGAIsame person whose name is subscribed ac principal to the foregoing pand the notary public and acknowledged signing and delivering the ins	power of attorney, appeared before m
of the principal, for the uses and purposes therein set forth. I believe himemory. The undersigned witness also certifies that the witness is not	im or her to be of sound mind and
health service provider or a relative of the physician or provider, (b) an owner or operator of a health care facility in which the principal is a parties endant, or any spouse of such parent, sibling, or described int of a successor agent under the foregoing power of attorney, when it is such	owner, operator, or relative of an tient or resident; (c) a parent, sibling, ither the principal or any agent or
adoption; or (d) an agent or successor agent under the foregoing power of autometry, whether second adoption; or (d) an agent or successor agent under the foregoing power of autometry, whether second adoption;	er of attorney.
Dated: 10/29/2012	
	Wilness
	(Q <sub>1</sub> ,
(NOTE: Illinois requires only one witness, but other jurisdictions may rewish to have a second witness, have him or her certify and sign here:)	aquira mora tivar one witness. If you
(Second witness) The undersigned witness certifies that	, know a to me to be
the same person whose name is subscribed as principal to the foregois me and the notary public and acknowledged signing and delivering the act of the principal, for the uses and purposes therein set forth. I believ memory. The undersigned witness also certifies that the witness is not	instrument as the free and voluntary we him or her to be of sound mind and and the attending physician or ments.
health service provider or a relative of the physician or provider, (b) an owner or operator of a health care facility in which the principal is a pai descendant, or any socuse of such parent, sibling, or descendant of el	owner, operator, or relative of an titlent or resident; (c) a parent, sibling, ther the principal or any agent or
successor agent under the foregoing power of attorney, whether such adoption; or (d) an agent or successor agent under the foregoing power	relationship is by blood, marriage, or er of attorney.
Dated:	
	Witness

1232126025 Page: 6 of 7

# **UNOFFICIAL COPY**

Dated:1(1/2)/2012	OFFICIAL SEAL PNILIP CHOW Notary Public - State of Illinois Notary
My commission rupires	My Commission Expires Aug 30, 2013
pecimen signatures of gent (and successors)	i certify that the signatures of my agent (and successors are genuine.
(agent)	(principal)
(successor agent)	(principal)
(successor agent)	(principal)
principal in completing this form shi	mber of the person preparing this form or who assisted the ould be inserted below.)
mirel By and Mu	and to.
Name: Philip Chow	al to:

1232126025 Page: 7 of 7

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Property of Cook County Clark's Office

STREET ADDRESS: 1253 W. CARMEN AVE.

CITY: CHICAGO COUNTY: COOK

TAX NUMBER: 14-08-308-017-0000

#### **LEGAL DESCRIPTION:**

LOT 18 IN BLOCK 2 IN CHYTRAUS' ADDITION TO ARGYLE IN THE SOUTHWEST 1/4 OF SECTION 8, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.