UNOFFICIAL COPY

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE YOUR DESIGNATED "AGENT" BROAD POWERS TO HANDLE YOUR FINANCIAL AFFAIRS, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY, EVEN WITHOUT YOUR CONSENT OR ANY ADVANCE NOTICE TO 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 AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD 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, YOU 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 "SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A FART.

POWER OF ATTORNEY, made this 3rd day of September, 2012.

1. I, Keith Cheong-Ming Chan, of 381 Banbury Rd. Toronto, ON, M2L2V2, hereby revoke
all prior powers of attorney for property executed by me and appoint, Anthony Campanale, 19 S.
LaSalle St., Suite 1500, Chicago, IL 60603, as my attorney-i 1-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

(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 transaction (545 N. Dearborn, Unit 1601, Chicago, IL 60654)
- (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



Doc#: 1233431027 Fee: \$72.00 Eugene "Gene" Moore RHSP Fee: \$10.00 Cook County Recorder of Deeds

Date: 11/29/2012 12:30 PM Pg: 1 of 5

1233431027 Page: 2 of 5

UNOFFICIAL COPY

tions
;

(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 (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 agent):

NONE

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).

NONE

(NOTE: Your agent will have authority to empley 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 to delegate discretionary decision-making powers to others, you should keep par graph 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: 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 ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

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

(NOTE: THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT

1233431027 Page: 3 of 5

UNOFFICIAL COPY

ANY TIME AN IN ANY MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME THE 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 on November 21 2012.
- 7. This power of attorney shall terminate on November 21 2013.

(NOTF. INSERT A FUTURE DATE OR EVENT, SUCH AS A COURT DETERMINATION THAT YOU ARE NOT UNDER A LEGAL DISABILITY OR A WRITTEN DETERMINATION BY YOUR PHYSICIAN THAT YOU ARE NOT INCAPACITATEED, IF YOU WANT THIS POWER TO TERMINATE PRIOR TO YOUR DEATH.) (NOTE: IF YOU WISH TO NAME ONE OR MORE SUCCESSOR AGENTS, INSERT THE NAME AND ADDPESS 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 rollowing (each to act alone and successively, in the order named) as successor(s) to such agent:

N/A

For purposes of this paragraph 8, a person thall 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 five prompt and intelligent consideration to business matters, as certified by a licensed physician.

(IF YOU WISH TO NAME YOU AGENT AS GUAPLIAN 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 YOU 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 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 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)

11. The Notice to Agent is incorporated by reference and included as part of this form

1233431027 Page: 4 of 5

UNOFFICIAL COPY

Dated: 0/3/12 Signed: Keith Cheong-Ming Chan			
(YOU MAY, BUT ARE NOT REQUIRED SUCCESSOR AGENTS TO PROVIDE SPINCLUDE SPECIMEN SIGNATURES IN COMPLETE THE CERTIFICATION OPPORT	ECIMEN SIGNATURES BELUY THIS POWER OF ATTORNEY,	, YOU MUST	
I certify that the Specimen signatures of my agent and successors of my agent are correct			
Agent	Principal		
Agent	Principal		
THIS POWER OF ALTORNEY WILL NOT BECOME EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW			
The undersigned witness certifies that Keith Cheong-Ming Chan, personally known to me to be the same person whose name is subscrized as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as his free and voluntary act of the principal, for the uses and purposes therein set forth. I believe him to be of sound mind and increasy.			
Dated , 2012.	- 15 C/6/4'		
STATE OF SS.	7,0		
I, the undersigned, a Notary Public in and f County, in the State aforesaid, DO HEREB personally known to me to be the same per foregoing power of attorney appeared before	son whose name is subscribed as	principal to the	
and acknowledged that he signed, sealed at voluntary act of the principal, for the uses a correctness of the signatures of the agent.	nd delivered the said instrument	as his lifee and	
GIVEN under my hand and notaria	al seal, on 9 , 2012	MARGARET PANITCH OFFICIAL MY COMMISSION EXPIRE AUGUST 25, 2014	
NOTARY PUBLIC This document prepared by and please ma	il to:		

This document prepared by and please mail to:
Anthony Campanale, Anthony Campanale & Associates, 19 S. LaSalle St. #1500, Chicago, IL 60603, 312-641-2233

1233431027 Page: 5 of 5

Escrow File No.: 1231459 UNOFFICIAL COPY

EXHIBIT "A"

PARCEL 1:

UNIT W1601, THE RESIDENCES AT GRAND PLAZA CONDOMINIUMS, AS DELINEATED ON A PLAT OF SURVEY OF THE FOLLOWING DESCRIBED TRACT OF LAND: LOTS 4A AND 4B, IN THE SUBDIVISION AT GRAND PLAZA, AS SAID LOTS ARE LOCATED AND DELINEATED BOTH HORIZONTALLY AND VERTICALLY IN SAID SUBDIVISION, BEING A RESUBDIVISION OF ALL OF BLOCK 25. IN KINZIE'S ADDITION TO CHICAGO, IN SECTION 10, ALSO OF BLOCK 16 IN WOLCOTT'S ADDITION TO CHICAGO, IN SECTION 9, AND ALSO ALL OF THE VACATED ALLEY, 18 FEET WIDE, IN SAID BLOCKS 16 AND 25 HERETOFORF DESCRIBED, ALL IN TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED DECEMBER 29, 2003 AS DOCUMENT NO. 0336327024 WHICH PLAT OF SURVEY IS ATTACHED AS EXHIBIT "A" TO THE DECLARATION OF CONDOMINIUM OWNERSHIP RECORDED OCTOBER 26, 2005, AS DOCUMENT 0529910137, AS AMENDED FROM TIME TO TIME, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, ALL IN COOK COUNTY, ILLINOIS.

PARCEL 2:

EASEMENTS FOR THE BENEFIT OF PARCEL 1 AS CONTAINED IN ARTICLE 3.4 OF THE DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS AND EASEMENTS RECORDED AUGUST 3, 2005 AS DOCUMENT 0521518064

NOTE FOR INFORMATION ONLY:

CKA: 545 N. DEARBORN STREET, UNIT 1601, CHICAGO, 11., 50654

PIN: 17-09-241-036-1075