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Doc#: 1233846076 Fee: \$68.00 Karen A. Yarbrough RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 12/03/2012 01:09 PM Pg: 1 of 4

### DURABLE POWER OF ATTORNEY

#### KNOW ALL MEN BY THESE PRESENTS:

That I, ARIE HILL, 587 Lily Creek Resort Rd, Jamestown, Russell County, Kentucky 42629, do hereby make, constitute and appoint my son, MARVIN HILL, PO Box 437, Jamestown, Russell County, Kentucky 42629, to be my true and lawful attorney-in-fact for me in my name, place and stead, and for my use and benefit, giving and granting unto my said attorney full power;

- To lease, sell, insure, transfer, mortgage, pledge, exchange or otherwise dispose of, or (1)er surber any and all of my property, real, personal or mixed, in which I now or hereafter have the interest, and to execute and deliver good and sufficient deeds or other instruments for the lease, converance, mortgage or transfer of same.
- To collect, sue for, compromise or otherwise dispose of any claim, debt, rents or (2) share in an estate in which 'no vor hereafter may have an interest.
- To eject, move, or relieve tenants or other persons from and recover possession of any (3)property, real personal or mixed, in which in two or hereafter have an interest.
- To buy, receive, lease, accept or otherwise acquire in my name and for my account, property, real personal or mixed, upon such terms, considerations and conditions as my said attorney-in-fact shall deem proper.
- (a) To institute prosecute, appear in, defend, compromise artitrate, settle or dispose of any legal equitable or administrative hearings, actions, suits, attachrae us, claims or other proceedings, including government claims, to which I am or may become a pury or in which I have an interest; and to engage and dismiss counsel in connection therewith.
- (b) To hire, engage, employ and appoint agents, employees and counsel upon suc terms and conditions and at such compensation as my said attorney-in-fact shall deem proper in the exercise of the powers herein granted; and to dismiss and remove at pleasure any such agents, employees and counsel heretofore or hereafter employed by me or in my behalf.
- To conduct all banking transaction including: (6)

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(a) Deposit in my name and for my account with any bank, banker, trust company or other financial institution, all monies which may come into the hands of my said attorney-in fact and all bills of exchange, drafts, checks, promissory notes, certificates of deposit and



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other securities for money payable or belonging to me, and for that purpose to sign my name (in the manner provided herein) and enforce the same for deposit or collection, and from time to time withdraw any and all monies deposited with such bank, banker, trust company or other financial institution that has monies so belonging to me, and for that purpose to draw checks and drafts thereon in my name in the manner herein provided.

- (b) Open and close accounts and to receive statements, notices or other documents from the bank or other financial institution concerning any and all accounts or banking transactions in my name or in which I have an interest.
- (c) Enforce, cash and receive the process of any and all checks, vouchers, certificates of deposit, certificates of savings or other orders for money.
- (d) Have access for all purposes to any and all safety deposit boxes or vaults rented in my name or in the name of any person or persons and myself, with full power to use the same for safeaceping any property or papers, and to remove therefrom at any time, or from time to time, all or any part of the contents thereof.
- (7) To borrow money in ,r, name when deemed necessary to my said attorney-in-fact upon such terms and conditions as r sy said attorney-in-fact may deem proper and to execute such instruments as may be required for such numbers.
- (8) To prepare, execute and file income and other tex returns.
- (9) To make all medical decisions for me, to select doctors and other medical professionals for my treatment and care; to select hospital running homes and foster care homes that might be needed for my care and treatment; to make decisions as to the use of life support machines, including placing me on life support or removing me from life support, it being my intention to give my attorney-in-fact full power to make all decisions concurring my medical treatment and/or refusal of medical treatment.

Further, I hereby authorize my aforesaid attorney-in-fact to perform all necessary accounts in the execution of the aforesaid authorizations and generally to do any and all acts on my behalf in any other manner or thing pertaining or belonging to me with the same validity as I could effect if personally present. I hereby declare that any act or thing lawfully done by my said attorney-in-fact shall be binding on myself and my heirs, legal and personal representatives and assigns.

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All business transacted hereunder for me or for my account shall be transacted in my name, and all endorsements and instruments executed by my said attorney-in-fact for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney-in-fact and the designation, "attorney-in-fact" or the initials "P.O.A."

This Durable Power of Attorney shall extend beyond any disability, either physical or mental, which may impair my ability to act. Unless revoked by me with an appropriate writing, this Durable Power of Attorney shall be limited only by my death.

I, further, do hereby revoke, countermand, annul and make void any and all previous Instruments granting Power of Attorney and all power and authority thereby given or DOM. intended to be given by said Power of Attorney. Kun B H wie

ARIE HILL

COMMONWEALTH OF KENTUCKY COUNTY OF RUSCELL

Before me, a Notery visic, in and for said county, personally appeared the above named, ARIE HILL, who acl n wiedged that he did sign the foregoing instrument and that

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this the 15th day of October, 2012.

> NOTAN PUBLIC STATE AT LARGE MY COMMISS'UN EXPIRES: 6-22-13 Copy Office

This instrument

BERTRAM & WILSON One Monument Square Jamestown, Kentucky 42629

(270) 343-3100

I verify that this is a true and correct copy of the original. Power of attorning dated 15th day of Get. 2012

3ESL31 Filed on:10/16/2012 10:24:41 AM Rook: DEED Number: 202 Pages: 498 - 492 Lisha Poppleweil , Russell County DC: SHARD POPPLEFIL Deed Tax:14.00

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# FIDELITY WIND FITE GURANCE COM



**ORDER NUMBER: 2011** 

052009050 STREET ADDRESS: 11221 MELROSE COURT

UOC

CITY: ORLAND PARK

TAX NUMBER: 27-06-410-080-0000

COUNTY: COOK COUNTY

LEGAL DESCRIPTION:

PARCEL 1:

THAT PART OF LOT 11 LYING NORTH OF A LINE THAT IS 98.51 FEET NORTH OF AND PARALLEL WITH THE SOUTH LINE OF SAID LOT 11, AND LYING SOUTH OF A LINE THAT IS 138.51 FEET NORTH OF AND PARALLEL WITH THE SOUTH LINE OF SAID LOT 11, IN THE COURTYARDS OF ORLAND PARK, BEING A SUBDIVISION OF PART OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 6, TOWNSHIP 36 NORTH, RANGE 12 EAST CF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2:

EASEMENT APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH IN THE COURTYARDS OF ORLAND PARK SUBDIVISION RECORDED NOVEMBER 3, 1995 AS DOCUMENT 95753441 AND AS CREATED BY COURTYARDS OF ORLAND PARK DECLARATION OF PARTY WALL RIGHTS COVENANTS, CONDITIONS, RESTRICTIONS AND EASEMENTS RECORDED NOVEMBER 3, 1995 AS A. JRES.

OLIMAN CICATAS OFFICA DOCUMENT 95754987 FOR INGRESS AND EGRESS, IN COOK COUNTY, ILLINOIS.