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Doc#: 1335035004 Fee: \$50.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 12/16/2013 09:03 AM Pg: 1 of 7

### ILLINO!S STATUTORY SHORT FORM

## POWER OF A ITORNEY FOR PROPERTY

LEGAL DESCRIPTION: LOT 16 IN BLOCK 2 IN CUYLER ADDITION TO RAVENSWOOD IN THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 18, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS. ON CONTS ONE

PIN: 14-18-417-006-0000

Prepared by: AUREUA Micko

Mail to:

Peri Mortgage, INC.

2936 W. Belmont Ave.

Chicago, IL 60618

FILE NO. 1031310PM065144

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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 your 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 is 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 make this Power of Attorney if you wish.

This Power of Attorney does not authorize your agent to appear in coun for you as an attorney-at-law or otherwise to engage in the practice of law unless he cargine 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 Illi rois 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

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## ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I Aurelia Micko of 380 Bridle Path Way, Tarpon Springs FL, 34688 (insert name and address of principal) hereby revoke all prior powers of attorney for property executed by me and appoint:

Celina Micko of 125 East Emerson, Arlington Heights IL 60005, (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 for Property Law" (including all amendments), but subject to any limitations on or additions to the specified powers is received in paragraph 2 or 3 below:

(NOTE: You must sail a put any one or more of the following categories of powers you do not want your agent to have. Failure to sail the title of any category will cause the powers described in that category to be granted to the agent. To sail the 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) Tangibie personal-property transactions
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (h) Social Security, employment and military service condities.
- (i) Tax matters.
- -(j) Claims and litigation.
- (k) Commodity and option transactions
- -(I) Business operations.
  - (m) Borrowing transactions.
- (n) Estate transactions.
  - (o) All other property transactions.

(NOTE: 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 the following particulars: (NOTE: Here you may include any specific limitations you deem appropriate, such as a prohib conditions on the sale of particular stock or real estate or special rules on borrowing by the ag N/A.	(ion or

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

To mortgage or otherwise encumber the property commonly known as 1839 W. Warner Ave., Chicago, IL 60613, or any rights, title or interests to the Property on any terms or considerations which my said attorney shall think proper; and to execute any instruments necessary to effectuate such refinance transaction, including, but not limited to, mortgages and deeds of trust, and specifically to obtain a mortgage loan from Perl Mortgage, its successors and/or assigns as their interests may appear, in the amount of \$568,125, on or about November 20, 2013 through December 20, 2013.

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GIVING AND GRANTING to our attorney full general power and authority to do and perform each and every act, deed, matter and thing whatsoever in and about our property, as fully and as effectively to all intents and purposes as we might or could in our own proper person do if personally present. I/We do hereby declare that any act or thing lawfully done hereunder by our said attorney shall be binding on me/us, my/our heirs, legal and personal representatives and my/ours assigns, whether the same shall have been done before or after my death or other revocation of this instrument, unless and until reliable intelligence or notice thereof shall have been received by our said attorney. (NOTE: Your agent wil have authority to employ other persons as necessary to enable the agent to property 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: Your agent will be entitled to reimbursement for all reasonable expenses incurred in acting under this power of attorney. 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 in cervices 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 until 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 6. ( ) This power of attorney shall become effective on November, 14, 2013. (NOTE: Insert a future date or event during your lifetime, such as a court determination of your disciplity or a written determination by your physician that you are incapacitated, when you want this power to first take effect.) 7. () This power of attorney shall terminate on Dec 20M, 2013 (NOTE: Can be longer than 60 days after effective date and no shorter than 30 days)

(NOTE: If you wish to name one or more successor agents, insert the name and address of each

successor agent in paragraph 8.)

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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.)

- 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 ager.

(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 electice 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.

Dated: November, 14, 2013.

Signed X.....(principal)

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

The undersigned witness certifies that <u>Aurella Micko</u> known to me to be the same person whose name is subscribed as principal to the foregoing ower 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, (h) 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 descar pant 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: 11-14-2013

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State of	
County of	
The undersigned, a notary public in and for the above Aurelia Mick , known to me to be the sprincipal to the forecoing power of attorney, appeared by CENE LOEBIS	ame person whose name is subscribed as
signing and delivering the incomment as the free and vol purposes therein set forth (, and certified to the correctno	HETORI ON OF the science of facility
Dated:November14th2013	Peter H. Christianson
My commission expires Indefinite y	Vice Consul Notary Public- United States of America
(NOTE: You may, but are not required to, request you a signatures below. If you include specimen signatures in a certification opposite the signatures of the agents.)	gent and successor agents to provide specimen this power of attorney, you must complete the
Specimen signatures of agent (and successors)	I certify that the signatures of my agent (and successors) are genuine.
(agent)	(principal)
(successor agent)	(prin(ipai)
(successor agent)	(principal)
(NOTE: The name, address, and phone number of the pe principal in completing this form should be inserted Frepared to 2 Name: AUREUA MICKO	erson preparing this form or who assisted the od below.)
Address: 380 Bridle Pets Way Tarpon	Spmp FL 34688
Phone: . (202) 966 3284	

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#### **"NOTICE TO AGENT**

When you accept the authority granted under this power of attorney a special legal relationship, known as agency, is created between you and the principal. Agency imposes upon you duties that continue until you resign or the power of attorney is terminated or revoked.

As agent you must:

(1) do what you know the principal reasonably expects you to do with the principal's property;

(2) act in good faith for the best interest of the principal, using due care, competence, and diligence;

(3) keep a complete and detailed record of all receipts, disbursements, and significant actions conducted for the principal;

(4) attempt to preserve the principal's estate plan, to the extent actually known by the agent, if preserving the pian is consistent with the principal's best interest; and

(5) cooperate with a person who has authority to make health care decisions for the principal to carry out the principal's reasonable expectations to the extent actually in the principal's best interest As agent you must not do any of the following:

(1) act so as to creat a conflict of interest that is inconsistent with the other principles in this Notice to Agent;

(2) do any act beyond the authority granted in this power of attorney;

(3) commingle the principal a funds with your funds;

(4) borrow funds or other property from the principal, unless otherwise authorized;

(5) continue acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney, such as the death of the principal, your legal separation from the principal, or the dissolution of your marriage to the principal.

If you have special skills or expertise, you must use those special skills and expertise when acting for the principal. You must disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name, "as Agent" in the following manner:

"(Principal's Name) by (Your Name) as Agent"

The meaning of the powers granted to you is contained in Section 3-4 of the Illinois Power of Attorney Act, which is incorporated by reference into the body of the power of attorney for property document.

If you violate your duties as agent or act outside the authority granter to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney."