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Karen A. Yarbrough

Cook County Recorder of Deeds Date: 12/19/2013 09:10 AM Pg: 1 of 8

Stopology Ox Cook POWER OF ATTORNEY JRi ORI Clark's Original

Prepared by and mail to after recording:

Sheryl Ghezzi

4433 West Touhy #404

Lincolnwood, IL 60712

201358432/8924269AH 1015 by CT

1335335025 Page: 2 of 8

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# ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, VASO DRAGICEVIC		
OF 7500 W CARMEN, HARWOO	OD HEIGHTS, IL 60706	
(insert name and address of pr	incipal)	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
hereby revoke silprior statute and appoint: (insert name and		for property executed by me
JENNIE SAVARINO / GAGICEVI	C OF 7500 W. CARMEN, HARWO	OD HEIGHTS. IL 80706
	<u> </u>	
(NOTE: You may not name co	o-agenc, using this form	n.)
as my attorney-in-fact (my "a could act in person) with responsible of the "Statutory Short Form amendments), but subject to as inserted in paragraph 2 or 3 be	ect to the following pove Power of Attorney for ny limitations on or add	vers, as defined in Section 3-4 Property Law" (including all
(NOTE: You must strike ou powers you do not want you category will cause the power agent. To strike out a category category.)	ur agent to have. Failuers described in that c	ure to strike the title of any ategory to be granted to the
(a) Real estate transactions.		CV .
(b) Financial institution transact	etions.	
(c) Stock and bond transaction	<del>9.</del>	
(d) Tangible personal property	transactions.	
(e) Safe deposit box transaction	<del>ns.</del>	
Form Revised July 15, 2011	755 ILCS 45/3-3	Page 3 of 11

W.N.

(f) Insurance and annuity transactions.
(g) Retirement plan transactions.
(h) Social Security, employment and military service benefits.
(i) Tax matters.
(j) Claims a Vitigation.
(k) Commodity and extion transactions.
(1) 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 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 of special rules on borrowing by the agent.)

3. In additio	n to the powers	granted above,	I grant my agen	t the following	powers:
limitation, p	ower to make g	gifts, exercise <sub>l</sub>	delegable pow powers of appoir amend any trust	itment, name o	r change
		<u>-</u>			
	70,				

(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 discretizeary 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 one 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 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 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:	
12/9/2013 At the closing of the property located at 7318 W Irving Park Rd. Norridge, IL	
(NOTE: Insert a future date or event during your lifetime, suc determination of your disability or a written determination by your you are incapacitated, when you want this power to first take effect.)	h as a court physician that
7. This power of attorney shall terminate on:	
after this closing of the property located at 7318 W Irving Park Rd. Norridge, IL Of	2 DEC 15-2
0.5	
(NOTE: Insert a future date or event, such as a court determination not under a legal disability or a written determination by your physicare not incapacitated, if you want this power to terminate prior to your	cian that you
(NOTE: If you wish to name one or more successor agents, insert taddress of each successor agent in paragraph %.)	he name and
8. If any agent named by me shall die, become incompetent, resign accept the office of agent, I name the following (each to acsuccessively, in the order named) as successor(s) to such agent:	or refuse to t alone and
9	)
(Include name, address and phone number for any named successors)	-6
For purposes of this paragraph 8, a person shall be considered to be incand while the person is a minor or an adjudicated incompetent or disaper the person is unable to give prompt and intelligent consideration matters, as certified by a licensed physician.	bled nerson
NOTE: If you wish to, you may name your agent as guardian of you court decides that one should be appointed. To do this, retain paragraph court will appoint your agent if the court finds that this appointment your best interests and welfare. Strike out paragraph 9 if you do not	h 9, and the twill serve

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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, as set out below, is incorporated by reference and included as part of this form.

Dated: 12-7-2013	Signed:	
		(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.)

Dated: 12 - 7 - 73

Signed:

(Witness)

Form Revised July 15, 2011

755 ILCS 45/3-3

Page 7 of 11

1335335025 Page: 7 of 8

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(NOTE: Illinois requires only one witness, but other jurisdictions may require more than one witness. If you wish to have a second witness, have him or her certify and sign here:)

(Second witness)
The undersigned witness certifies that VASO Dragicevic, known to
me to be the same person whose name is subscribed as principal to the foregoing
power of caorney, 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 mine
and memory. The unacrsigned 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 egent under the foregoing power of attorney
whether such relationship is by blood, marriage, or adoption; or (d) an agent of
successor agent under the foregoing power of attorney.
- 10/7/12 Sin Balana
Dated: 12 7 13 Signed: Such Royco
(Witness)
State of <u>FL/NOIS</u> ) OFFICIAL SEAL
) SS. NOTARY MULIC, STATE OF ILLINOIS
County of Cook ) IN COMME JAIC SEPTIMES 2-16-2017
O <sub>FSC</sub> .
The undersigned, a notary public in and for the above county and state, certifies
that VASO Deaght, 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

The undersigned, a notary public in and for the above county and state, certifies that who with the foregoing power of attorney, appeared before me and the witness(es) from (and witness) 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: 12/7/2013		Signature	Augela	Hos	Notary Public
,		_	J	' / '	Notary Public
	_				

My commission expires: 2-16/17

Form Revised July 15, 2011

755 ILCS 45/3-3

Page 8 of 11

1335335025 Page: 8 of 8

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STREET ADDRESS: 7318 W IRVING PARK ROAD

·CITY: NORRIDGE COUNTY: COOK

TAX NUMBER: 12-13-415-031-0000

#### LEGAL DESCRIPTION:

LOT 44 IN VOLK BROTHERS SECOND ADDITION TO SHAW ESTATES BEING A SUBDIVISION IN THE SOUTHEAST 1/4 OF SECTION 13-40-12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Property of County Clark's Office