

1434433020 Fee: \$50.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 12/10/2014 10:10 AM Pg: 1 of 7

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Dr. h. LEGAL DESCRIPTION: 1450 Delia Dr, Hoffman Estates, IL 60169

PIN: 07-08-200-050-0000

Prepared by: Erik Spurling

Mail to:

Perl Mortgage, INC.

2936 W. Belmont Ave.

Chicago, IL 60618

FILE NO. 1061403PM069417



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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 or 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 no 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 sne 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.

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

Principal's initials

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY
FOWER OF ATTORNET FOR PROPERTY
1. IERIK SPURLING, of911 CHRISTA CT, ELK GROVE VILLAGE, IL 60007 hereby revoke all prior powers of attorney for property executed by me and appoint:BONNIE PURLING_, of911 CHRISTA CT, ELK GROVE VILLAGE, IL 60007
ALOTE Management and the form
(NOTE: You may not name co-agents using this form.) as my attorney-in-fact (m) "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 rul a mendments), 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. Failure to strike the title of a sy category will cause the powers described in that category to
be granted to the agent. To strike out a catagory 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) 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. (l) Business operations. (m) Borrowing transactions. (n) Estate 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 activity 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.)

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	• •		
To mortgage or otherwise enc	imber the property	commonly known a	s1450 DELLA DR,
HOFFMAN ESTATES, IL 60169	, or any ri	ghts, title or interest	s to the Property on any
terms or considerations which	my said attorney sh	nall think proper; and	d to execute any
instruments necessary to effect	uate such refinance	transaction, includi	ing, but not limited to,
mortgages and deeds of trust,	and specifically to	obtain a mortgage	loan fromPERL
MORTGAGE, INC	, its successors and	d/or assigns as their in	terests may appear, in the
amount of \$363,200 or less of	or aboutO	CTOBER 22 ND 20	14 through
NOVEMBER 22 ND	2014		

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

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 heresy shall be binding on me/ whether the same shall		al and personal re	presentatives and	my/ours assigns
instrument, unless and usaid attorney.	ıntil reliaHe intelligei	nce or notice there	eof shall have beer	n received by ou

(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 boom may select, but such delegation may be amended or revoked by any agent (including any successor) no ned 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.)

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.)

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OCTOBER, 15TH 2014
(NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability
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
7. () This power of attorney shall terminate onNOVERMBER 22 ND 2014
(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.)
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:
NONE
For 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 he me 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.)
6 Mary 18 and 18 Company of the Comp
9. If a guardian of my estate (my propert,) is to be appointed, I nominate the agent acting under this
power of attorney as such guardian, to serve wi nout bond or security.
10. I am fully informed as to all the contents of this from and understand the full import of this grant of
powers to my agent.
powers to my again.
(NOTE: This form does not authorize your agent to appear in cour cfor 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.
10/2
Dated: / 6/3,, 2014.
Signed X
(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.)
The undersigned witness certifies that _ERIK SPURLING 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 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

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mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative

sibling, descendant, or any spouse of such pare agent or successor agent under the foregoing p	In which the principal is a patient or resident; (c) a parent, ent, sibling, or descendant of either the principal or any power of attorney, whether such relationship is by blood, assor agent under the foregoing poyler of attorney.
Dated: i. 4.1.3 (19	x Atollh
	Witness
State of Line S	"OFFICIAL SEAL" JENNIFER A. ZINGRE Notary Public, State of Illinois My Commission Expires 07/27/17
principal to the foregoin frower of attorney, app	be the same person whose name is subscribed as beared before me and the witness(es)
signing and delivering the instrument as the free purposes therein set forth (, and certified to the	e and voluntary act of the principal, for the uses and correctness of the signature(s) of the agent(s))
Dated/0/3/14	
My commission expires 7/27/17	Notary Public
	est your egent and successor agents to provide specimen atures in this power of attorney, you must complete the offs.)
Specimen signatures of agent (and successors)	I certify that the signatures of my agent (and successors) are genuine.
(agent)	(principal)
(successor agent)	(prin(म al)
(successor agent)	(principal)

(NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)

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Name:

Address:

Phone: .

"NOTICE TO AGENT

When we accept the authority granted under this power of attorney a special legal relationship, known as agency, accepted 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 yo: 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 (n) principal's estate plan, to the extent actually known by the agent, if preserving the plan 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 expricts tions 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 create a conflict of interest mat 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's 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 Plancis Power of Attorney Act, which is incorporated by reference into the body of the power of attorney for paperty document.

If you violate your duties as agent or act outside the authority granted 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 renould seek legal advice from an attorney."