

1504250024

This Instrument prepared
By and after recording
Return to:
Lawrence Swibel
Fox, Swibel, Levin & Carroll, LLP
200 West Madison St.
Suite 3000
Chicago, Hinois 60606

Doc#: 1504250024 Fee: \$60.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00 Karen A.Yarbrough Cook County Recorder of Deeds Date: 02/11/2015 11:02 AM Pg: 1 of 12

# STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Includes Amendments Required By Public Act 96-1195 Form Valid July 1, 2011

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 coagents.

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

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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.



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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 she 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.

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, Ruth Swibel 1114 Grant Street, Evanston, Illinois 60201
(insert name and address of principal)
hereby revoke all prior statutory powers of attorney for property executed by me and appoint: (insert name and address of agent)
Lawrence Swibel, Fox, Swibel, Levin & Carroll, LLP, 200 West Madison Street,
Suite 3000, Chicago, Hinois 60606
O <sub>F</sub>
(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 er 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 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 too 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.

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(f) Insurance and annuity transactions.
(g) Retirement plan transactions.
(h) Social Security, employment and military service benefits.
(i) Tax matters.
(j) Claims आत litigation.
(k) Commodity and option 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.)
purchase of 3515 Thornwood Avenue, Wilmette, IL 60091

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

										including,	
limitation	n, powe	er to	make	gifts,	exer	cise p	owers of	f app	ointme	nt, name o	r change
beneficia below.)	ries or	joint	tenan	ts or i	revol	ke or a	amend a	ny tri	ust spe	cifically re	ferred to
					_						
	X	2									

(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 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 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.)

AIOTE.

6. This power of attorney shall become effective on:
February 6, 2015
(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:
The close of the real estate transaction at 3515 Thornwood Avenue, Wilmette, Illinois or by February 10, 2015.
O <sub>/X</sub>
(NOTE: Insert a funce 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 incapacitated, 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 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:
——————————————————————————————————————
(Include name, address and phone number for any named successors)
For purposes of this 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

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(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

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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

•			
	C	Quest	_
Dated:	Signed:	Sules of	B
	TC		(Principal)
(NOTE: This power of att	torney will not be ef	fective unless it i	s signed by at least
one witness and your signa	ature is notarized, us	sing the form belo	w. The notary may
not also sign as a witness.)		5	, ,
The undersigned witness	certifies that Kulin	Swibe	, known
to me to be the same perso	n whose name is sub	oscribed as princip	oal to the foregoing
power of attorney, appear	ed before me and t	he notary public	and acknowledged
signing and delivering the	instrument as the fre	ee and voluntary	act of the principal,
for the uses and purposes t	herein set forth. I be	lieve him or her t	o be cr sound mind
and memory. The undersign	ned witness also cer	rtifies that the wi	tness is not: (a) the
attending physician or mer	ital health service pr	rovider or a relati	ve of the physician
or provider; (b) an owner,	operator, or relative	of an owner or or	perator of a health
care facility in which the	principal is a patier	nt or resident; (c	) a parent, sibling,
descendant, or any spous	e of such parent, s	ibling, or descen	dant of either the
principal or any agent or	successor agent und	er the foregoing	power of attorney,
whether such relationship	is by blood, marria	ge, or adoption;	or (d) an agent or
successor agent under the f	oregoing power of at	ttorney	1.
Dated: 1 Drugy 5, Jois	Signed:	Children 4	.lll
•			(Witness)

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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 c	ertifies that	, known to
me to be the same person	whose name is subscribed	d as principal to the foregoing
		tary public and acknowledged
		voluntary act of the principal,
		nim or her to be of sound mind
		that the witness is not: (a) the
		r or a relative of the physician
		owner or operator of a health
		resident; (c) a parent, sibling,
descendant, or any spous	e of such parent, sibling	, or descendant of either the
principal or any agent or s	successor agent under the	foregoing power of attorney,
		adoption; or (d) an agent or
		, •
Dated:	Signed:	
State of Illinois  County of Cook	70x	(Witness)
		(1, 2333032)
State of Illinois	) (	
^	) SS.	0.
County of Cook	)	4,
•		2
The undersigned, a notary	public in and for the abo	ove county and state, certifies
that Ruth Swite I, known	to me to be the same pers	son whose name is subscribed
as principal to the forego	oing power of attorney,	appeared before me and the
		acknowledged signing and
delivering the instrument a	s the free and voluntary ac	et of the principal, for the uses
and purposes therein set for	orth (, and certified to the	correctness of the signature(s)
of the agent(s)).		,
<b>1</b> .		46
Dated: <u>Jebruary 5, 2015</u>	_ SignatureUSM	(Vea)
,	}*************************************	Notary Public
X	Official Seal Susan Eterno Notary Butting	<b>2</b> 22 30
My commission expires:	Notary Public State of Illinois My Commission Expires 07/22/2018	7-23-18
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<b>,</b> , =		I UKO 7 ULIL

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# NOTICE TO AGENT POWER OF ATTORNEY FOR PROPERTY

(NOTE: This notice is incorporated by reference and included as a part of this Power of Attorney for Property.)

When you (the agent) 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 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 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 create 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's funds with your funds;

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- (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 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 outies that you do not understand, you should seek legal advice from an attorney."

(f) The requirement of the signature of a witness in addition to the principal and the notary, imposed by Public Act 91-790, applies only to instruments executed on or after June 9, 2000 (the effective date of that Public Act).

(NOTE: This amendatory Act of the 96th General Assembly (Public Act 96-1195, effective July 1, 2011) deletes provisions that referred to the one required witness as an "additional witness", and it also provides for the signature of an optional "second witness".)

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#### **EXHIBIT A**

#### LEGAL DESCRIPTION

LOT 1 IN BLOCK 4 IN LAKEWOOD MANOR SUBDIVISION OF THE WEST 30 ACRES OF THE EAST 40 ACRES OF THE SOUTH 60 ACRES OF THE EAST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 30, TOWNSHIP 42 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT PART LYING WESTERLY OF A LINE DRAWN PARALLEL WITH AND 135 FEET EASTERLY FROM MEASURED AT RIGHT ANGLES EASTERLY LINE OF RIGHT OF WAY OF THE CHICAGO NORTHWEST RAILROAD ALSO EXCEPT THE SOUTH 50 FEET USED FOR STREET) IN COOK COUNTY, ILLINOIS.

351c 05-30-30. 05-004 04-001 05-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 01-004 0 Commonly known as: 3515 THORNWOOD AVE, WILMETTE, IL 60091

Permanent Index No.: 05-30-307-007-0000