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Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 03/17/2015 10:20 AM Pg: 1 of 6

ILLINO: 5 STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY Effective 7.1.11

Preparer File:

FATIC No.:

Text of Section after amendine (a) 7.4. 96-1195)

Sec. 3-3. Statutory short form power L' attorney for property.

(a) The form prescribed in this Sector ma be known as "statutory properly power" and may be used to grant an agent powers with respect to property and financial, nat'ars. The "statutory property power" consists of the following: (1) Notice to the Individual Signing the Illinois Statutory Short Form Power of Attorney for Property; and (3) Notice to Agent. When Prower of attorney in substantially the form prescribed in this Section is used, including all 3 items above, with item (1), the Notice to Individual Signing the Illinois Statutory Short Form Power of Attorney for Property, on a separate sheet (covershee), in 14-point type and the notarized form of acknowledgment at the end, it shall have the meaning and effect prescribed in this Act.

(b) A power of attorney shall also be deemed to be n sut stantially the same format as the statutory form if the explanatory language throughout the form (the language following the designation "NOTE:") is distinguished in some way from the legal paragraphs in the form, such as the use of boldface or of her lifference in typeface and font or point size, even if the "Notice" paragraphs at the beginning are not on a separate sheet of payer or are not in 14-point type, or if the principal's initials do not appear in the acknowledgement at the end of the "Notice of payers."

The validity of a power of attorney as meeting the requirements of a caurory property power shall not be affected by the fact that one or more of the categories of optional powers listed in the firm are truck out or the form includes specific limitations on or additions to the agent's powers, as permitted by the form. Nothing in this Article shall invalidate or bar use by the principal of any other or different form of power of attorney for property. Nonstrutions or operty powers (i) must be executed by the principal, (ii) must designate the agent and the agent's powers, (iii) must be signed by at least one witness to the principal's signature, and (iv) must indicate that the principal has acknowledged his other signature before a notary public. However, nonstatutory property powers need not conform in any other respect to the statu on property power.

(c) The Notice to the Individual Signing the Illinois Statutory Short Form Power of Atto nev for Property shall be substantially as follows:

"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 go remed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should as', a hawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated "agent" broad powers to handle your financial and ships 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

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 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:

nincipal's initials"

FIRST AMERICAN TITLE

J619819
First American
Title Insurance Company

IL Statutory Short Form Power of Attorney 7.1.11

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1507635019 Page: 2 of 6

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY Effective 7.1.11

(d) The Illinois Statutory Short Form Power of Attorney for Property shall be substantially as follows:

"ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1.	l,	YONATa	N S	SAFIRSTEL	∧) executed by me	(insert name and address of principal)
Hereby	revoke a	all prior powers	s of attorn	ey for property	executed by me	and appoint:
D	awid	Freyd	.iN			(insert name and address of agent)
name (in ar; w	ay I could act	t in perso	on) with respec	t to the following	-in-fact (my "agent") to act for me and in my g powers, as defined in Section 3-4 of the
"Statute limitatio	ory Shor ons on or	racitions to the	r of Attor	rney for Prope ed powers inse	erty Law" (Includerted in paragraph	ding all amendments), but subject to any h 2 or 3 below:
(NOTE have. F	: You mu Failure to	ist suirc out a strike the dife	ny one or	r more of the fo	ollowing categorie	es of powers you do not want your agent to described in that category to be granted to
the age	ent. To st	rike out a દવ્યલ	gory you	must draw a lir	ne through the titl	le of that category.)
(A)		tate transactio				
(B)		al institution tra nd bond transa		S		
(C) (D)		e personal pro		nacii ns		
(E)		posit box trans		100,10,10.		
(F)		ce and annuity		ions.		
(G)		ent plan trans	,			
(H)	Social S	Security, emplo	oyment ar	nd military se v	ice benefits.	
(l)	Tax ma	tters			~ O.	
(J)		and litigation.			J. J	
(K)		dity and option	n transact	tions.	40	
(L)	Busines	s operations.				
(M)	Borrowi	ing transaction	ıs.			
(N)	Estate t	ransactions.				
(0)	All othe	r property tran	sactions.		,	
NOTE:	Limitation	s on and additi	ons to the	agent's powers	may be included	in this power of attorney if they are specifically
describe	ed below.))			·	Tio
particula	ars: (NO	ΓΕ: Here you m	ay include	any specific lim	following powers on itations you deem on borrowing by th	or shall be modified or limited in the following appropriate, such as a prohibition or conditions be agent.)
J.,	00	to a so Pe	is a	10 w/l 11	3031 11	Chase A. D. Chicago 11. 60645
	SUX	-, mansju	- and	- oonocy	JU31 W	. Chase Ave Chicago 12 60645
3 1	In addition	to the powers	granted at	oove I grant my	agent the following	g powers: (NOTE: Here you may add any other
delegat	ole power	s including, wit	thout limit	ation, power to	make gifts, exercipecifically referred	cise powers of appointment, name or change
(NOTE:	Your age	ent will have au	uthority to	employ other pe	ersons as necessa	ary to enable the agent to properly exercise the
powers	granted i	n this form, but	your ager	nt will have to m	ake all discretiona	ary decisions. If you want to give your agent the
right to out.)	delegate	discretionary de	ecision-mal	king powers to d	otners, you should	keep paragraph 4, otherwise it should be struck



1507635019 Page: 3 of 6

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY Effective 7.1.11

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

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power or attorney.
(NOTE: This power of attorney may be amended or revoked by you at any time and in any manner. Absent amendment of revocation, the authority granted in this power of attorney will become effective at the time this power is signed and with 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 charmey shall become effective on
(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 has you are incapacitated, when you want this power to first take effect.)
7. () This power of attorney shall turninate on March 13, 2015
(NOTE: Insert a future 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 incrimpe ent, 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
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 promot 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 could 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 besinterests 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 uncler 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 is incorporated by reference and included as part of this form.
Dated: 3-3-15
Signed:
(Principal)

1507635019 Page: 4 of 6

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY Effective 7.1.11

(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 Yonaton Safinstein 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 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 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: Signed: (Witness) (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 to ac known to me to be the same person whose name is subscribed as principar 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 mental health se vice 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 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. 3/6/4/5 Dated: Signed: (Witness) STATE OF ILLINOIS, COUNTY OF COOK The undersigned, a notary public in and for the above county and state, certifies that Youther Sufficient known to me to be the same named in the same named known to me to be the same person whose name is subscribed as principal to the foregoing power of a toriey, appeared before me and the witness(es) Elizabeth putonio (and 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)). March 3 2015 Dated: **Notary Public** 10-26-2015 My commission expires:

First American
Title Insurance Company

OFFICIAL SEAL REDA GABRIELLA TYMARSKIS Notary Public - State of Illinois My Commission Expires Oct 26, 2015

iL Statutory Short Form Power of Attorney 7.1.11

1507635019 Page: 5 of 6

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY Effective 7.1.11

(NOTE: You may, but are not required to, request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this power of attorney, you must complete the certification opposite the signatures of the agents.)

Specir	men signatures of agent (and successors)	l certify that the signatures of my agent (and successors) are genuine.		
		Mortalita		
((agent)	(principal)		
	(successor agent)	(principal)		
	(s) ccessor agent)	(principal)		
		erson preparing this form or who assisted the principal in		
*	g this form should be inserted below.)			
Name: Address:	Law Offices of David Freydin 8707 Skokie Blvd Ste 305 Skokie IL 60077			
Phone:	(847) 972-6157			
	attorney for property	ce to Agent" and shall be supplied to an agent appointed under		
between ye		nrney a special legal relationship, known as agency, is created uties that continue until you resign or the power of attorney is		
(1) do	what you know the principal reasonably expects you in good faith for the best interest of the principal, us			

- (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;
 - (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 duties 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 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".) (Source: P.A. 96-1195, eff. 7-1-11.)



1507635019 Page: 6 of 6

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LEGAL DESCRIPTION

Legal Description: LOT 21 IN OLIVER SALINGER AND COMPANY'S KENILWORTH AVENUE ADDITION TO ROGER'S PARK IN SECTION 25, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index #'s: 10-25-326-009-0000 Vol. 0502

Property Address: 3031 West Chase Avenue, Chicago, Illinois 60645

Droperty of Cook County Clark's Office