## **UNOFFICIAL COPY**

#### "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 inaltagent 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 in it 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 at thorize your agent to appear in court for you as an attorney-at-law or otherwise to engage in the practice of lav unless he or she is a licensed attorney who is authorized to practice law

The powers you give your agent are explainer 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:

Hepared by F Mait to:
Kelli Fagarty
1433 W. Hurron St.
Chicago, Illawyz

PROPER TITLE, LLC 180 N. Lasalle Street Ste. 2440 Thicago, IL 60601

PT15-0 1544 3,53

151,7£6161 Fee: \$76.00 RHSP Fee:\$9.00 Furf F Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 05/27/2015 09:57 AM Pg: 1 of 6

1514756161 Page: 2 of 6

## **UNOFFICIAL COPY**

#### "ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, April Fernando, hereby revoke all prior powers of attorney for property executed by me and appoint:

#### **KELLI A. FOGARTY**

(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 inserted in paragram 12 or 3 below:

(NOTE: You rous' strike out any one or more of the following categories of powers you do not want your agent to have. Failure to form'te the title of any category will cause the powers described in that category to be granted to the agent. To strike ou' 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) Tangible personal property transactions.
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions
- (g) Retirement plan transactions.
- (h) Social Security, employment and military se vice benefits.
- (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.)

OUNTY (

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:

Limited to the purchase of real estate commonly known as 1643 N Rockwell #1, Chicago, Illinois, 50F47.

3. In addition to the powers granted above, I grant my agent the following powers: NONE

1514756161 Page: 3 of 6

## UNOFFICIAL COPY

(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 actorney. 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 snail be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(NOTE: This power of attorriev 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 and 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 offective on the date of execution of this document.
- 7. ( ) This power of attorney shall terminate carriage 20, 2015.

(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 is unable to perform the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

<u>DEAN N. FUGATE, 1433 W. Huron St., Chicago, IL 60642</u>

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.

(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 wan 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 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:

Signed \_\_\_ (principal)

The undersigned witness certifies that April Fernando, known to me to be the same person whose name is

1514756161 Page: 4 of 6

## **UNOFFICIAL COPY**

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: 5

Signed:

WithFas

County of Alameda

The undersigned, a notary public in an i for the above county and state, certifies that <u>April Fernando</u>, 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 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.

Dated:

Signed:

Notary Public

DAVID E. HALVERSON COMM. # 2091012

PHOTARY PUBLIC - CALIFORNIA DO ALAMEDA COUNTY

COMM EXPIRES DEC. 20, 2018

1514756161 Page: 5 of 6

# **UNOFFICIAL COPY**

**ACKNOWLEDGMENT** A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. State of California Alameda County of before me, David E. Halverson, notary public (insert name and title of the officer) personally appeared April Fernando and Stacey Katz who proved to me on the basic or satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrumer, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature \ (Seal) OPTIONAL INFORMATION . THIS OPTIONAL INFORMATION SECTION IS NOT REQUIRED BY LAW BUT MAY BE BENEFICIAL TO PERSONS RELYING ON THIS NOTAL ZED DOCUMENT. TITLE OR TYPE OF DOCUMENT IL Stuhtony Short form power of attorns DATE OF DOCUMENT 5/11/15 NUMBER OF PAGES SIGNERS(S) OTHER THAN NAMED ABOVE SIGNER'S NAME SIGNER'S NAME RIGHT THUMBPRENT RIGHT THUMBPRINT

1514756161 Page: 6 of 6

# **UNOFFICIAL CC**

Dmitriy Meleshko As an Agent for Fidelity National Title Insurance Company 200 Milwakee Ave # 300 Buffalo Grove, Illinois 60089

Commitment Number: PT15\_01544AA4

#### SCHEDULE C PROPERTY DESCRIPTION

Property commonly known as: 1643 N. ROCKWELL ST, UNIT 1 CHICAGO, IL 60647 Cook County

The land referred to in this Commitment is described as follows:

UNIT 1 IN 1643 ROCK VELL CONDOMINIUM AS DELINEATED AND DEFINED ON A PLAT OF SURVEY OF THE SOUTHEAST 1/4 OF SECTION 36, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED TO THE DECLARATION RECORDED AS DOCUMENT 1501529073, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON MI.
IS.
OOF COUNTY CLEARLY OFFICE ELEMENTS, IN COOK COUNTY, ILLINOIS.

13-36-429-005

**ALTA Commitment** Schedule C

(PT15\_01544AA4.PFD/PT15\_01544AA4/23)