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Karen A. Yarbrough

Cook County Recorder of Deeds Date: 10/28/2015 02:46 PM Pg: 1 of 7

SHORT FORM
POWER OF ATTORNEY FOR PROPERTY

0/5 COO4 e.,Oa. Prepared by: Renee Thibault, 15613 Ridgeland Ave., Oak Forest, IL 60452

Mail to:



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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 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 coes 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 age it 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

		، سید	\sim	٠,
1. I,	Ted	J.	Przec	noract.
(Insert name and address of principal)			1	
hereby revoke all prior powers of attorney for property executed by	me and ap	pgint	72.0-	
(insert name and address of agent)	led	<u>D,</u>	rrze	piora
(NOTE: You may not name co-agents using th	rie form)			•
as my attorney-in-fact (my "agent") to act for me and in my name (in	any way	Leculd	act in no	room\ith
respect to the lonowing powers, as defined in Section 3-4 of the "Sta	atuton/ Sh	ort For	m Dower	of Attornay
To Froberty Law (including all amendments), but subject to any limit	itations or	or ad	ditions to	the
specified powers inserted in paragraph 2 or 3 below:				
(NOTE: You must strike out any one or more of the following car	tegories o	f powe	rs you do	not want
your agent to have. Failute to Strike the title of any category will call	se the now	vare di	i bodinoac	n that
category to be granted to the agent. To strike out a category you mu category.)	ıst draw a	line th	rough the	title of that
Salogoly.)				
(a) Real estate transactions.				
(b) Einanciatiostituticux (ansertious.				
(c) adoppe and propopal transform				
(d) Kandanakanakanakanakanakanakanakanakanaka				
(e) SATA NA PARTY NA				
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(m) Blackownick have be known.				
(n) Estate xight sactions (
(o) MKGMRAAKAKAKAKAKARAKA				
(NOTE: Limitations on and additions to the				
(NOTE: Limitations on and additions to the agent's powers may be in they are specifically described below.)	ic'uded in	this po	ower of at	torney if
and are appearing described below.)	(//			
2. The powers granted above shall not include the following powers the following powers are the following powers.	ere or sho		odifical a	e limeite et in
the following particulars:	CIS OI SIID	in Me II		miniced W
(NOTE: Here you may include any specific limitations you deem appli	ropriate, s	uch as	a prohib	ition or
Conditions on the sale of particular stock or real estate or special rule	is on horn	nuina i	hu tha an	ant l
Powers are specific to the real estate transaction of 2106 W. 22nd P	Place, Chic	ago, I	<u> 60002</u>	
				···
				
In addition to the powers granted above, I grant my agent the f	following r	owers	:	
(NOTE: Here you may add any other delegable powers including, wit	thout limite	ation, p	ower to r	nake gifts,
exercise powers of appointment, name or change beneficiaries or joil trust specifically referred to below.)	nt tenants	or rev	oke or an	nend any
No Additional Powers				
The state of the s				· · · · · · · · · · · · · · · · · · ·
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(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. Мунадали ктап менения мунитивт теминет менедаламу опам областа по областа

(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. Niy.açı nishandalerindi edindi essonadre odanaperisedi dilbi iseniodes removered essageri omora nine!!!!!!! Bures of length of length of the companies of th

(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 initiaing and completing one or both of paragraphs 6 and 7.)

6. () This power of attorney shall become effective on Im ned ately upon my execution hereof.

(NOTE: Insert a future date or event dunn pour 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 December 31 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 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:

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 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 agent to act as guardian.)

9. \fia/guardian/of/my/estate/(my/property/)/a/to/foe/appointed////nonthate/the/agant/acting/under/this/////// power/of/attomey/es/suchriguardis//poiser/en/thout/bookbonsecodity/////

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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: / Day 15
Signed 707. Type (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 Ted Pizepiera The undersigned witness certifies that Ted Pizepiera The property of attorney, appeared to the foregoing power of attorney, appeared
before me and the notary public and scknowledged 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 relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator or 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: 8/12/15
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 that <u>Ted Przepiora</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 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:
Witness

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State of MI)			
State of M) County of GOLGUNC)			
The undersigned, a notary Ted Przepiora		above county and state, or to me to be the same per	
subscribed as principal to the foreging Brittani Dabli	oing power of attorr and	ney, appeared before me a	and the witness(es)
in person and acknowledged signin principal, for the uses and purposes of the agent(s)).	g and delivering the therein set forth (,	instrument as the free an and certified to the correct	d voluntary act of the tness of the signature(s)
Dated: 612/15] No	HELLE MAUZER otary Public of Wisconsin	· .
My commission expires 12/16	116		Notary Public
(NOTE: You may, bu' are not requiresignatures below. If you include specertification opposite the signatures	ecimen signatures ii	agent and successor age on this power of attorney, yo	nts to provide specimen ou must complete the
Specimen signatures of agent (and successors)	C	I certify that the signatures of my agent (and successors)are genuine.	
Ted Przepiora	(agent)	Ted Przepiora	(principal)
(su	ccessor agent;	Ted Przepiora	(principal)
(st	ccessor agent)	ico Przepiora	(principal)
(NOTE: The name, address, and pl principal in completing this		erted below.)	
Name: Renee Thibault			Office
Address: 15613 Ridgeland Av	/e.		Ox
Oak Forest, IL 6045	2		
Phone:			<u>_</u> 0

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ILLINOIS STATUTORY

SHORT FORM

POWER OF ATTORNEY FOR PROPERTY Addendum

Property Address: 2106 W. 22nd Place

Chicago, IL 60608

Permanent index Number:

Legal Descripton

LOT 46 IN BLOCK I IN MOOFES SUBDIVISION OF THE EAST 1/2 OF THE NORTH WEST 1/4 OF SECTION 30, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS. n, Ounit Clart's Office