UNOFFICIAL



Boc# 1633304040 Fee \$44.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 11/28/2016 12:23 PM PG: 1-0-4-

2/3

Power of Attorney

KNOW ALL BY THESE PRESENT, that I CARMELLA R. TROSZYNSKI, whose address is 521 8th Ave., LaGrange, IL 60525, do hereby constitute and appoint my daughter, JAMIE M. ZAURA, my true and lawful attorney for me, in my stead and on my behalf, to do all as I might if personally present, to wit:

(1) To grant, bargain, pledge, sell, transfer, mortg 196, encumber, hypothecate and convey all my right, title and interest in and to the following described property

Legal Description:

LOT 64 IN ROBIN HOOD ESTATES, A SUBDIVISION IN THE SOUTHEAST ¼ OF SECTION 28, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, AS SHOWN ON PLAT RECORDED THE 2ND DAY OF JULY, 1945 AS DOCUMENT 13541788, IN COOK COUNTY, ILLINOIS

Attorneys' Title Guaranty Fund, Inc.

Commonly known as: 1506 Kings Court, LaGrange Park, IL 60526

Tax Item No: 15-28-400-042-0000

1 S. Wacker Dr., STE 2400 Chicago, IL 60606-4650

Attn. Search Department

For such price and such terms and conditions as he/she shall deem proper.

CARMELLA R. TROSZYNSKI,

(2) To act for me and execute all documents, including but not limited to deeds, land contracts, leases, settlement papers, purchase agreements, mortgages, promissory notes, security pledges, lending documents and all other related documents necessary for purchase and financing of said property.

(3) Giving and granting our said attorney full power and authority to do and perform all and every act and thing whatsoever to all intents and purposes requisite and necessary to be done in and about the premises as fully as we might or could do if personally present, and hereby ratify and confirm all that our said attorney shall lawfully do or cause to be done by virtue of these presents.

(4) This Power of Attorney is effective immediately and will expire on: 11/15/2016.

AMIE M. ZAURA

Dated this 4 Tday of November 2016.

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UNOFFICIAL COPY
Signed in the presence of: WINESS SIGNATURE PRINT WITNESS NAME
State of Illinois)) SS
County of Cook)
The undersigned, a notary public in and for the above county and state, certifies that CARMELLA R. TROSZYNSKI, personally known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me 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 certifies to the correctness of the signature of the agent. Dated this
Notary Public CARLOS SOLORIO Official Seal
My commission expires Notary Public - State of Illinois My Commission Expires Mar 15, 2020
The undersigned witness certifies that CARMELLA R. TROSZYNSKI, known to me to be the same person whose name is subscribed as principal to the origining 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 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 this 7 day of November, 2016. Witness State of Illinois) County of Cook)
State of Illinois) County of Cook)
The undersigned, a notary public in and for the above county and state, certifies that Ien Ser Showler, known to be the same person whose name is subscribed as witness to the foregoing power of attorney, appeared before me in person and acknowledged signing and delivering the instrument as their free and voluntary act, for the uses and purposes therein set forth herein. CARLOS SOLORIO Official Seal Notary Public

My commission expires

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ATTORNEYS' TITLE GUARANTY FUND, INC.

POWER OF ATTORNEY FOR PROPERTY AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for

Jamie	Zaura	
	Name of Principal	

I certify that, to the best of my knowledge, the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I accept appointment as agent under this power of attorney.

1

This certification and acceptance is made under penalty of perjury.*

234 HAVERISON Addres

*NOTE: Perjury is defined in Section 32-2 of the Criminal Code of 1961, and is a Class 3 felony. in the office

1633304040 Page: 4 of 4

ALINOFTELCURALTYCO, PRY

LEGAL DESCRIPTION

Permanent Index Number:

Property ID: 15-28-400-042-0000

Property Address:

1

1506 KINGS CT.

LAGRANGE PARK, IL 60526

Legal Description:

LOT 64 IN ROBIN HOOD ESTATES, A SUBDIVISION IN THE SOUTHEAST 1/4 OF SECTION 28, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, AS SHOWN ON PLAT RECORDED THE 2ND DAY OF JULY, 1945 AS DCC. MENT 13541788, IN COOK COUNTY, ILLINOIS.

COOK COUNTY RECORDER OF DEEDS

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