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Karen A. Yarbrough

Cook County Recorder of Deeds Date: 05/01/2017 11:18 AM Pg: 1 of 9

INOIS STATUTORY

SHORT FORM

OOA COUNTY CLORA'S OFFICE POWER OF ATTORNEY FOR PROPERTY

Prepared by Christopher S. Jordan 141 W Jackson Blvd, Suite 2720 Chicago, IL 60604

Mail to: Christopher S. Jordan 141 W Jackson Blvd, Suite 2720 Chicago, IL 60604

PIN# 14-08-402-017-1003

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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 successe: 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 that agent control over your financial assets and property. Any agent who does act for you has a duty to act in good with 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? 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.

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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:

TODORAN OF COOK COUNTY CLORES OFFICE

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

100 m N 0 m 00	
1.1, Mary Ann Bass (insert name	
and address of principal) hereby revoke all prior powers of attorney for property executed by the and	
appoint William A Bass	
(insert name and address of agent) (NOTE: You may not name co-agents using this form.)	
as my attorne, 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" (involuting all amendments), but subject to any limitations on or additions to the specified	
powers inserted in rura graph 2 or 3 below:	
(NOTE: You must strike cut inly 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 the title of that category.)	
(a) Real estate transactions.	
(b) Financial institution transactions.	
(c) Stock and bond transactions. (d) Tangible personal property transaction.	
(e) Safe deposit box transactions.	
(f) Insurance and annuity transactions.	
(g) Retirement plan transactions.	
(h) Social Security, employment and military service be refits.	
(i) Tex matters.	
(j) Claims and litigation.	
(k) Commodity and option transactions.	
(I) Business operations.	
(m) Borrowing transactions.	
(n) Estate transactions.	
(n) Alt 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.)	
/x.	
2. The powers granted above shall not include the following powers or shall be modified or limited in the	
following perficulars:	
nnote. 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 or special rules on borrowing by the agent.)	
3. In addition to the powers granted above, I grant my agent the following powers:	
ANOTE: Here you may add any other delegable powers including, without limitation, power to make gitts,	
exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust	\mathcal{L}
specifically referred to below:	K or
M. Kin mort Aug	
exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below. The power to execute all documents relating to the purchase of 5123 N Kenmore Ave. Ur	
1 mmy 63	
\ _a_ ~ T1	
Chicago, In	
(unit 62 chicago, IL 60640	

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(NOTE: Your agent will have authority to employ other persons as necessary to enable the agent to proper 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.)	ly '
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.	9
(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.)	e
5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.	9 r
(NOTE: This power of attorney may be an ended 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.)	
6. () This power of attorney shall become effective on April 14, 2017	
(NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability or written determination by your physician that you are incapacitated, when you want this power to first take effect.)	а
7. () This power of attorney shall terminate on August 15, 2017	
(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.))Į
8. If any agent named by me shall die, become incompetent, resign or refuse to accept the conte of agent name the following (each to act alone and successively, in the order named) as successor(s) to such agent	πt
Fa	· · · ·
purposes of paragraph 8, a person shall be considered to be incompetent if and while the person is a minor 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.)	

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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.)

PURCHING KIM (I) MILLONS	7.00
11. The Notice to Agent is incorporated by reference and included as part of t	his form. SSIE CUT PRESE
Dated:	TENNESSEE
Signed Main an Barr	PUBLIC PU
(principal)	OSON COU
	My Commission Expires 03/06/2018
(NOTE: This power of attorney vali not be effective unless it is signed by at least signature is notarized, using the ional below. The notary may not also sign as a t	witness.)
The undersigned witness certifies that \(\frac{1}{2} \) \(sthe free and voluntary act to be of sound mind and tending physician or mental perator, or relative of an sident; (c) a parent, sibling, rincipal or any agent or ip is by blood, marriage, or
Dated: 11-19-2017	Witness
INOTE: Illinois requires only one witness, but other jurisdictions may require mo	re than ing witness. If you
wish to have a second witness, have him or her certify and sign here:)	
(Second witness) The undersigned witness certifies that the same person whose name is subscribed as principal to the foregoing power me and the notary public and acknowledged signing and delivering the instrume act of the principal, for the uses and purposes therein set forth. I believe him or memory. The undersigned witness also certifies that the witness is not: (a) the a health service provider or a relative of the physician or previder; (b) an owner, or owner or operator of a health care facility in which the principal is a patient or redescendant, or any spouse of such parent, sibling, or descendant of either the psuccessor agent under the foregoing power of attorney, whether such relationsh adoption; or (d) an agent or successor agent under the foregoing power of attorney.	per attorney, appeared before ant as the free and voluntary her to be of sound mind and attending physician or mental perator, or relative of an sident; (c) a parent, sibling, principal or any agent or
	Witness

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State of)	
County of Summer) ss.	
The undersigned, a notary public in and for the above MANA AND LASS	d the witness(es) EA StahSbctt11
as the free and voluntary act of the principal, for the destribe correctness of the signature(s) of the agent(s)).	S WIND POR PORTOR
Dated: 4-19-17	Kaultutt Notary Publ
My commission expires 03 DL 2018	•
(NOTE: You may, but are not required to, request your a signatures below. If you include specimen signatures in certification opposite the signatures of the agents.)	agent and successor agents to provide specimen this power of attorney, you must complete the
Specimen signatures of agent (and successors)	I certify that the signatures of my agent (and successors) are genuine.
(agent)	(principal)
(successor agent)	(principal) (principal) (principal)
(successor agent)	
(NOTE: The name, address, and phone number of the principal in completing this form should be inse	person prepari.rr, wis form or who assisted the inted below.)
Name: Christopher S. Jordan 141 W Jackson Address: Suite 2720	
Chicago, IL 60604	C.
312-561-5063 Phone:	

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"NOTICE TO AGENT

When you 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) coro trate 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 to 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 bay and the authority granted in this power of attorney;

(3) commingle the retricipal's funds with your funds;

(4) borrow funds or other property from the principal, unless otherwise authorized;

(5) continue acting on beraif of the principal if you learn of any event that terminates this power of attorney or your authority under this prives of attorney, such as the death of the principal, your legal separation from the principal, or the discolution 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 adent 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 authors / granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your virilation.

If there is anything about this document or your duties that you do not understand, you should seek legal -10/4's Office

advice from an attorney."

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Exhibit A - Legal Description

Unit Number 02 in the 5121-5123 North Kenmore Avenue Condominium, as delineated on a survey of the following described real estate:

Lot 3 in Block 3 in Argyle Subdivision, a Subdivision of Lots 1 and 2 of Fussey and Fennimore's Subdivision of the Southeast Fractional 1/4 and Lots 1 and 2 of Colehour and Conarroe's Subdivision of Lot 3 in Fussey and Fennimore's Subdivision Section 8, Township 40 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois:

Which Survey is attached as exhibit "B" to Declaration of Condominium recorded August 21, 2007 as Document 0723315044, as may be amended from time to time; together with its undivided percentage interest in the common elements in Cook County Illinois.

5123 N Kenmore Avenue, Condo G2, Chicago, Illinois 60640
Permanent Index Normer: 14-08-402-017-1003