

# UNOFFICIAL COPY



\*1713913039\*

**Return To:** James J. Kash  
6545 W. Archer Ave.  
Chicago, Illinois 60638

Doc# 1713913039 Fee \$44.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 05/19/2017 11:33 AM PG: 1 OF 4

POWER OF ATTORNEY FOR PROPERTY  
FOR  
FLORENCE LYONS

LEGAL DESCRIPTION

Lot Six (6) and the South Half of Lot Five (5) in Block Two (2) in Fourth Addition to Clearing, a Subdivision of the South Three Quarters of the West Half of the South East Quarter of Section Seventeen (17) Township Thirty-Eight (38) North, Range Thirteen (13) East of the Third Principal Meridian, Situate in the City of Chicago, County of Cook in the State of Illinois.

PIN: 19-17-410-024-0000

Common Address: 6016 S. Monitor Avenue, Chicago, Illinois 60638

# UNOFFICIAL COPY

## ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. (NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART (SEE THE BACK OF THIS FORM). THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

POWER OF ATTORNEY made this 26th day of March, 2015.

I, **Florence Lyons** of 6016 S. Monitor, Chicago, IL 60638

hereby appoint:

**Anthony Lyons** of 240 Knoll St, Wheaton, IL 60187

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 paragraph 2 or 3 below:

- (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 service benefits.
- (i) Tax matters.
- (j) Claims and litigation.
- (k) Commodity and option transactions.
- (l) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

2. The powers granted above shall not include the following powers or shall be modified or

# UNOFFICIAL COPY

limited in the following particulars (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):

NO LIMITATIONS

3. In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below):

**(a) Gifts:** My agent shall have the power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust. This power shall be used so as to carry out my estate plan as set forth in my Last Will and Testament.

**(b) Other Compensations:** To compensate separately any brokers, attorneys, auditors, depositories, real estate managers, investment advisors and other persons (including my agent and any firm with which my agent is associated without reducing compensation in any capacity).

**(c) Power to fully or partially withdraw and change form of assets:** My agent shall have full power and authority to deposit to and withdraw from any and all of my financial institution accounts including Totten Trust accounts which I am named as a trustee, any trust for my benefit, annuities, and retirement accounts and insurance policies and other contractual arrangements even though these assets may have named beneficiaries who would take at my death. It is my intent that any account that I created over which I had control over, including as a trustee, and whose proceeds I could have used for my benefit during my lifetime, may be controlled in like manner by my agent to use any part or all of the proceeds for my benefit or to carry out my estate plan as set forth in my Last Will and Testament and any other estate planning documents. The agent shall have the power to direct such financial institutions or trustee to pay part or all of the income or principal or account to the agent even though such payment could be considered a revocation or amendment of the trust, a gift of the principal's property, an exercise of power of appointment, a change of a beneficiary designation to take the principal's interests at death under any will, trust, joint tenancy, beneficiary form or contractual arrangement.

4. My agent shall have the right by written instrument to delegate any or all of the forgoing 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.

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(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 INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

6. This power of attorney shall become effective on the date signed

7. This power of attorney shall terminate upon my death. My subsequent disability or incapacity shall not terminate this power of attorney.

# UNOFFICIAL COPY

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:  
**Patrick Lyons**, 535 Harding, Glen Ellyn, Illinois, 60137; **John H. Lyons**, 485 Mooresfield, Elgin, Illinois, 60123.

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.

Signed *Florence Lyons*  
(principal)

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)

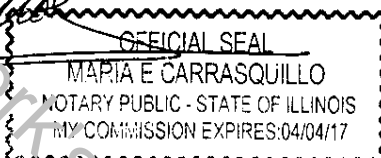
State of Illinois

County of Cook

The undersigned, a notary public in and for the above county and state, certifies that **Florence Lyons** is 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 additional 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: 3-27-15<sup>th</sup> (SEAL)

Notary Public *Maria E. Carrasquillo*  
My commission expires 04-04-17



The undersigned witness certifies that **Florence Lyons**, 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.

Dated: 3-27-2015 (SEAL)

Witness *Sue Zygalski*

Witness *Marianne E. Long*