UNOFFICIAL COP

Doc# 1715212044 Fee \$52.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 06/01/2017 10:34 AM PG: 1 OF 8

POWER OF ATTORNEY

Prepared by and Mail to Thomas J. Moran 5300 West Devon Avenue Chicago, IL 60646

Openty Ox Co This Power of Attorney is being created by the Principal, he pi STEPHEN S. ZUTTER, for the Purchase of the property located at: 5820 N. OZARK AVE CHICAGO, IL 60631 Legal Description:

ATTACHED HERETO

Principal: Stephen S. Zutter Agent: Kathryn A. Zutter

> Attorneys' Title Guaranty Fund, Inc. 1 S. Wacker Dr., Ste. 2400 Chicago, IL 60606-4650 Attn: Search Department



1715212044 Page: 2 of 8

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 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, dispersements, 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 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 any 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 the law. The "Note" paragrapts throughout the 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 sign it.

Please place your initials on the following line indicating that you have read this Notice:

Principal's Initials

Principal's Initials

1715212044 Page: 3 of 8

UNOFFICIAL COPY

ILLINOIS SHORT FORM POWER OF ATTORNEY FOR PROPERTY

POWER OF ATTORNEY MADE THIS 12 DAY OF MAY, 2017

1. I, STEPHEN S. ZUTTER, of 19620 Bear Lake Road, Hancock, MI 49930, hereby revoke all prior powers of attorney for property executed by me and appoint KATHRYN A. ZUTTER, of 6634 West Schreiber Ave., Unit # 1, Chicago, IL 60631 (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 the invitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

(NOTE: You must strike out any one or more of the following categories of powers you do not want your agent ic have. Failure to strike the title of the category will cause the powers described to be granted to the egert. To strike out a category you must draw a line through the title of that category.)

- a) Real estate transactions.
- b) Financial Institution t ans ections.
- c) Stock and bond transactions:
- d) Tangible personal property ransactions.
- 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.
- i)-Claims and litigation.
- k) Commodity and option-transactions.
- 1) Business operations.
- m) Borrowing transactions.
- n) Estate transaction.
- o) All other property transactions.

2 Clarks (NOTE: Limitations on and additions to the agent's powers may be included in this power of attorney of they are specifically described below.)

- 2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars: Powers are limited specifically to authority to sign any and all contract documents and/or note and/or mortgage documents and/or trust documents and/or title company documents and/or closing documents for the purchase and closing of the residential property located at 5820 North Ozark Ave. Chicago, IL 60631. (NOTE: 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 without limitation: Not Applicable.

1715212044 Page: 4 of 8

UNOFFICIAL COPY

(NOTE: 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.)

(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) carned 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 attorney. 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 shall be entitled to leas mable compensation for services rendered as agent under this power of attorney.

(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 May 15, 2017.

(NOTE: Insert a future date or event during your 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 Thirty-Five (35) days after the actual closing date for the purchase of the residential property known as 5820 North Ozark Ave., Chicago, H. 60631. (CLOSING OATE IS MAY JJ, 2017)

(NOTE: Insert a future date or event, such as a court determination that you are not under 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.)

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: Thomas J. Moran of 5300 West Devon, Chicago, IL 60646.

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. Not applicable.
- 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 engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law in Illinois.)

Dated: May 12 2017.

Signed: STRPHEN S. ZUZTER -- 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.)

1715212044 Page: 6 of 8

UNOFFICIAL COPY

The undersigned witness(es) certifies that ... STEPHEN S. ZUTTER ... 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 to be of sound mind and memory. The undersigned witness(es) 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.

health care facility in which the principal is a pa	·		-	
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 success	sor agent under the	e foregoing pov	ver of attorn	
A sit	•			
Dated: MA / 12, 2017.				
1/0				
	Λ .	_		
William o auce	WITNE	مع مع	an-	
WITNESS #1	WITNE	SS # 2		
		~		
Printed Name: FRANK IN VANCE	Printed Name:	Colleen	Egan	
	_			
(NOTE: Illinois requires only one wunces but of	ther jurisdictions	may require mo	ore than one	
witness. If you wish to have a second with ss, h				
		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	0,			
	46			
State of Illinois)	1//			
) cc				
) SS.).		
County of Cook)				
	OUNT C	(Q _A ,		
771 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 11 11 11	1/4/		
The undersigned, a notary public in and for the	above jurisdiction	certifies that	*1 1	
STEPHEN S. ZUTTER 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 witne s(es)				
(Frank Vance and Colle	en tsan	_) in person and	d	
acknowledged signing and delivering the instrument		nd voluntary ac	t of the	
principal for the uses and purposes therein set for	orth.	1	<u>_</u> 0	
9	<i>////</i>	1//		
12	12.M			
Dated: MAY	X DOM!N	Man	-	
<u>C</u> .	Notary I	Public		
My commission expires:	*****			
<u> </u>	OEE!	CIAL SEAL	~}	
	3	A M MORAN	}	
	3	C - STATE OF ILLINO!	s {	
		ON EXPIRES: 12/12/19		
	3	······································	س	

1715212044 Page: 7 of 8

UNOFFICIAL COPY

(NOTE: You may, but are not required to request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this power of attorney, you must complete the certification opposite the signatures of the agents.)

SPECIMEN SIGNATURES ARE NOT REQUIRED BY PRINCIPAL.

	s gnatures of d successors)	I certify that the signatures of my agent (and successors) are genuine.
Agent	T.	Principal
Succes	sor Agent	Principal
Succes	sor Agent sor Agent	Principal
		the person preparing this form or who assisted
Name:	Attorney Thomas J. Moran	O.
Address:	5300 West Devon Avenue Chicago, IL 60646	O _{ff}
Phone:	773-631-6520	
Email:	tjmoranlaw@sbcglobal.net	

1715212044 Page: 8 of 8

LINOFFICIALITEOPIX

LEGAL DESCRIPTION

Permanent Index Number:

Property ID: 12-01-310-040-0000

Property Address:

5820 North Ozark Ave Chicago, IL 60631

Legal Description:

That part of Lot 26 lying Easterly of a line described as follows: Commencing at a point on the Southerly line of Lot 26, 23 feet Easterly of the Southwest corner of said Lot 26, thence running North in a straight line to the Northwest corner of said Lot 26 in "Thordale" being Schavilje and Knuth's Resubdivision of part of Lot 4 in Frederick Koehler Estate Subdivision of of the north of Columns Clerk's Office the West half of Section 31, Township 40 North, Range 12, East of the Third Principal Meridian, according to the plat thereof registered in the Office of the Registrar of Titles as Document Number 1473293, Cook County, Illinois.