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POWER OF ATTORNEY FOR PROPERTY

based on Illinois statutory short form

Prepared by:

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Mail recorded document to:

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Doc# 1717817030 Fee: \$54.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 06/27/2017 10:04 AM Pg: 1 of 4

(NOTE: This power of attorney has been prepared specifically for one transaction. See Section 3-4 of the Illinois Power of Attorney Act for additional notes and instructions if any alternative powers of attorney provisions are desired).

1. I, Jalpa Thakkar, Principal, of 811 Blue Ridge Drive, Streamwood, IL 60107, hereby revoke all prior powers of attorney for property executed by me and appoint Jonathan A Vold, of 900 E Northwest Hwy, Mt Prospect, IL 60056, 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:

Borrower Transactions, Financial institution transaction and Real estate transactions

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:

Powers granted are limited to actions related to the purchase of real estate property located at 2094 Falmouth Court, Streamwood, IL 60107, and legally described as stated in Exhibit A, attached hereto;

3. In addition to the powers granted above, I grant my agent the following powers:

None.

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.

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

6. This power of attorney shall become effective on:

the date of execution.

7. This power of attorney shall terminate on:

the earlier of the conclusion of the purchase of the aforesaid real estate or 60 days after execution.

JT (Principal's initials)

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Baird & Warner Title Services, Inc.
475 North Martingale
Suite 120
Schaumburg, IL 60173

Bw 17-31591 883 2083

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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:

NONE

For purposes of this 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.

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.

11. The Notice to Agent is incorporated by reference and included as part of this form.

Dated: 5/30/17 Signed: Jalpa Jalpa Thakkar, 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 Jalpa Thakkar, 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: 05-30-17 Signed: [Signature] Witness

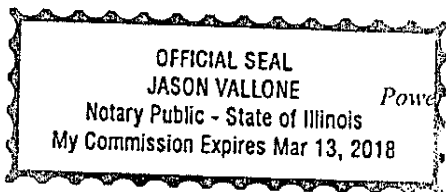
State of IL)
) SS.
County of Cook)

The undersigned, a notary public in and for the above county and state, certifies that Jalpa Thakkar, 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 witness Jalpa Thakkar 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 certified to the correctness of the signature(s) of the agent(s)).

Dated: 5/30/17 Signed: [Signature], Notary Public
My commission expires 3/13/2018

Maria
Alfonso
JV

JT (Principal's initials)



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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) cooperate 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 do 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 beyond the authority granted in this power of attorney;
- (3) commingle the principal's funds with your funds;
- (4) borrow funds or other property from the principal, unless otherwise authorized;
- (5) continue acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney, such as the death of the principal, your legal separation from the principal, or the dissolution 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 agent 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 authority granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney."

AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I, Jonathan A Vold, certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for **Jalpa Thakkar**.

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.

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

Dated: 6-7-17

Signed:  , Agent

Jonathan A Vold
900 E Northwest Hwy
Mt Prospect, IL 60056

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

(Source: P.A. 96-1195, eff. 7-1-11.)

UNOFFICIAL COPY**EXHIBIT "A"**

LOT 4 IN BLOCK 209, THE OAKS UNIT NO. 1, BEING A SUBDIVISION OF PART OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 26, AND PART OF THE NORTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED APRIL 19, 1966 AS DOCUMENT NO. 19801128, IN COOK COUNTY, ILLINOIS.

06-26-353-045-0000

Property Address:

2094 Falmouth Ct.

Streamwood IL 60107

Cook County Clerk's Office