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Doc#: 1721515124 Fee: \$56.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 08/03/2017 11:31 AM Pg: 1 of 5

Property of Cook County Clerk's Office

POWER OF ATTORNEY FOR PROPERTY

Property Address: 1828 Wildberry Dr, Unit C, Glenview, IL 60025

PIN: 04-23-302-017-1003

Legal Description: PARCEL 1: UNIT NUMBER 5-'C', AS DELINEATED ON THE SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE, (HEREINAFTER REFERRED TO AS "PARCEL"):

PART OF BLOCK 2, IN VALLEY LO, UNIT NUMBER 5, BEING A SUBDIVISION IN SECTION 23, TOWNSHIP 42 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN;

WHICH SAID SURVEY IS ATTACHED AS EXHIBIT "A", TO A CERTAIN DECLARATION OF CONDOMINIUM OWNERSHIP, MADE BY THE EXCHANGE NATIONAL BANK OF CHICAGO, AS TRUSTEE UNDER TRUST AGREEMENT DATED, APRIL 25, 1966, AND KNOWN AS TRUST NUMBER 19407, AND RECORDED IN THE OFFICE OF THE RECORDER OF DEEDS, OF COOK COUNTY, ILLINOIS, AS DOCUMENT NUMBER 21244446; TOGETHER WITH AN UNDIVIDED 18.95 PERCENT INTEREST IN THE SAID PARCEL, (EXCEPT FROM THE SAID PARCEL, ALL THE PROPERTY AND SPACE COMPRISING ALL THE UNITS THEREON, AS DEFINED AND SET FORTH IN THE SAID DECLARATION OF CONDOMINIUM OWNERSHIP AND SURVEY), IN COOK COUNTY, ILLINOIS.

PARCEL 2: EASEMENT FOR INGRESS AND EGRESS, FOR THE BENEFIT OF PARCEL 1, AS CREATED BY DEED, (DOCUMENT NUMBER 21244446, AND AMENDED BY DOCUMENT NUMBER 21282451), FROM THE EXCHANGE NATIONAL BANK OF CHICAGO, A NATIONAL BANKING ASSOCIATION, AS TRUSTEE UNDER TRUST AGREEMENT DATED, APRIL 25, 1966, AND KNOWN AS TRUST NUMBER 19407, TO DONOVAN M. POBANZ AND MARIE J. POBANZ, DATED MAY 18, 1971, AND RECORDED JUNE 11, 1971, AS DOCUMENT NUMBER 21509318, WITH RESPECT TO THAT PORTION OF REAL ESTATE DESCRIBED AS "DRIVEWAY", UPON THE SURVEY ATTACHED TO THE DECLARATION OF CONDOMINIUM, RECORDED AS DOCUMENT 21244446, IN COOK COUNTY, ILLINOIS.

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ILLINOIS NON-STATUTORY LIMITED SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Non-Statutory Power of Attorney made this 27 day of July, 2017.

I, Anna Raiber, hereby appoint: Ben Raiber, 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.

(NOTE: You must strike out any 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. | (g) Retirement plan transactions. | (l) Business operations. |
| (b) Financial institution transactions. | (h) Social Security, employment | (m) Borrowing transactions. |
| (c) Stock and bond transactions. | and military service benefits. | (n) Estate transactions. |
| (d) Tangible personal property transactions. | (i) Tax matters. | (o) All other property powers |
| (e) Safe deposit box transactions. | (j) Claims and litigation. | and transactions. |
| (f) Insurance and annuity transactions. | (k) Commodity and option 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.)

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

The execution of any all documents related to the purchase of 1828 Wildberry Drive, Unit C, Glenview, Illinois 60025.

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

Execution of loan documents pertaining to the Mortgage Loan made by One Republic Mortgage Inc. to Ben Raiber, Anna Raiber and Felix Raiber in connection with their purchase of 1828 Wildberry Drive, Unit C, Glenview, Illinois 60025.

(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 the next sentence, 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) named 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 the next sentence 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 reasonable compensation for services rendered as agent under this power of attorney.~~

(NOTE: 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

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initialing and completing one or both of paragraphs 6 and 7:)

6. (X) This power of attorney shall become effective on July 31, 2017

7. (X) This power of attorney shall terminate upon closing of the purchase of: 1828 Wildberry Drive, Unit C, Glenview, Illinois 60025.

(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 successor agents, insert the name(s) and address(es) of such successor(s) in the following paragraph.)

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:

(insert name and address of agent) (NOTE: You may not name co-agents using this form.)

(insert name and address of agent) (NOTE: You may not name co-agents using this form.)

For purposes of this paragraph 8, a person shall be considered 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. 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.)

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

Dated: July 27, 2017

Signed:

Anna Raiber

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WITNESS PAGE

(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 **Anna Raiber**, 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 the principal 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: July 27, 2017 Signed: *Yolanda Seals*
Yolanda Seals, 225 W. Washington St. #1700, Chgo, IL 60606
(insert name and address of witness)

(NOTE: Illinois requires only one witness, but other jurisdictions may require more than one witness. If you wish to have a second witness, have him or her certify and sign here.)

The undersigned witness certifies that **Anna Raiber**, 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 the principal 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: _____ Signed: _____

(insert name and address of witness)

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NOTARY PAGE

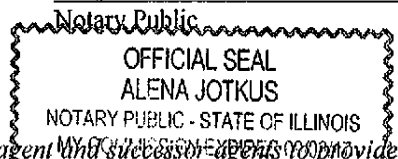
State of Illinois)
)s.s.
County of Cook)

The undersigned, a notary public and for the above county and state, certifies that **Anna Raiber**, 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(es) listed on the Witness Page 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: 7/27/17

Signed: *Alena Jotkus*

My commission expires: 9/3/17



(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 of agent (and successors)

I certify that the signatures of my agent (and successors) are correct.

(Agent)

(Principal)

(Successor Agent)

(Principal)

(Successor Agent)

(Principal)

(NOTE: The name and address of the person preparing this form should be inserted if the agent will have power to convey any interest in real estate.)

Mar 10
This document was prepared by: Alena Jotkus, Deutsch, Levy & Engel, Chartered, 225 W. Washington Street, Suite 1700, Chicago, Illinois 60606.