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KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 12/22/2017 09:41 AM PG: 1 OF 10

This document was prepared by:
Joseph W. Sparks
6503 S. Laflin
Chicago, Illinois 60636

Return To:
Joseph W. Sparks
6503 S. Laflin
Chicago, Illinois 60636

DURABLE POWER OF ATTORNEY

OF

Joseph W. Sparks

NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "ATTORNEY-IN-FACT") 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 ATTORNEY-IN-FACT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR ATTORNEY-IN-FACT 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 ATTORNEY-IN-FACT. A COURT CAN TAKE AWAY THE

DOC#517712468

BOX 334 CTI

LAND TRUST DEPARTMENT LT

Handwritten notations: S, P, S, SC, IN, with a large 'Y' and '10' and other scribbles.

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POWERS OF YOUR ATTORNEY-IN-FACT IF IT FINDS THE ATTORNEY-IN-FACT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR ATTORNEY-IN-FACTS UNDER THIS FORM. 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 ATTORNEY-IN-FACT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED.

I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Joseph W. Sparks, who reside at 6503 S. Laflin, Chicago, Illinois 60636, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below:

Joseph Von Sparks
Chicago, Illinois

If Joseph Von Sparks resigns or is unable or unwilling to serve or continue to serve as my attorney-in-fact, I appoint the following person to serve as my successor attorney-in-fact:

Conrad D. Sparks
Chicago, Illinois

II. EFFECTIVE TIME

This power of attorney is effective immediately, and will not be affected by subsequent disability or incapacity of the principal. This is a durable power of attorney.

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III. POWERS OF ATTORNEY-IN-FACT

To the extent permitted by law, my attorney-in-fact may act in my name, place, and stead in any way that I myself could with respect to the following matters:

YOUR ATTORNEY-IN-FACT SHALL BE AUTHORIZED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.

(J.S.)

TANGIBLE PERSONAL PROPERTY TRANSACTIONS:

- Buy or otherwise acquire ownership or possession of, sell or otherwise dispose of, mortgage, pledge, assign, lease, insure, maintain, improve, pay taxes on, otherwise manage tangible personal property and interests in tangible personal property that I now own or later acquire, and exercise all powers with respect to personal property and interests in personal property that I could if present and under no disability.

(J.S.)

BANKING AND FINANCIAL TRANSACTIONS:

Conduct any business with banks, savings and loan associations, credit unions, and other financial institutions, including but not limited to the authority to:

- Sign and endorse all checks and drafts in my name.
- Deposit and withdraw funds from accounts.
- Open, maintain, and close accounts or other banking arrangements.
- Open, continue, and have access to all safe deposit boxes, and add and remove items from them.
- Borrow money, pledge property as security, and negotiate terms of debt payments.
- Apply for and receive letters of credit, credit cards, and traveler's checks, and give an indemnity or other agreement in connection with letters of credit.
- Exercise all powers with respect to financial institution transactions that I could if present and under no disability.

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(9/8)

INSURANCE AND ANNUITY TRANSACTIONS:

- Obtain, modify, renew, convert, rescind, pay the premium on, or terminate insurance and annuities of all types for myself and for my family and other dependents.
- Designate the beneficiary of the contract, but the attorney-in-fact may be named a beneficiary of the contract, or an extension, renewal, or substitute for it, only if the attorney-in-fact was named as a beneficiary under a contract procured by the principal before signing this power of attorney.
- Surrender and receive the cash value, borrow against, or pledge any insurance or annuity policy.
- Exercise all powers with respect to insurance and annuity transactions that I could if present and under no disability.

(9/8)

ESTATE AND TRUST TRANSACTIONS:

- To act for me in all matters that affect a trust, probate estate, guardianship, conservatorship, escrow, custodianship, or other fund from which I am now, claim to be, or later become entitled, as a beneficiary, to a share or payment, including but not limited to the authority to sign a qualified disclaimer pursuant to Internal Revenue Code Section 2518 and applicable state law, and petitions, objections, waivers, consents, receipts, settlements, and other agreements relating to the above-referenced matters or proceedings.
- Transfer any of my property to a living trust that I created as a grantor before this power of attorney was signed.
- Exercise all powers with respect to estate and trust transactions that I could if present and under no disability.

(9/8)

LEGAL ACTIONS:

To act for me in all legal matters, whether claims in my favor or against me, including but not limited to the authority to retain and discharge attorneys on my behalf; appear for me in all actions and proceedings, commence actions in my name, sign all documents, submit claims to arbitration or mediation, settle claims, and pay judgments and settlements; and exercise all powers with respect to legal actions that I could if present and under no disability.

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(Signature)

GOVERNMENT BENEFITS:

Claim and collect benefits from the Social Security Administration, including, but not limited to, retirement benefits, supplemental social security, and social security disability benefits and, Medicare, Medicaid, or state, local, and other government programs or civil or military service, and to exercise all powers with respect to government assistance that I could if present and under no disability.

(Signature)

RETIREMENT PLAN TRANSACTIONS:

To act for me in all matters that affect my retirement, deferred compensation, or pension plans, including but not limited to the authority to select payment options, designate beneficiaries, make contributions, exercise investment powers, make "rollovers" of plan benefits, borrow or sell assets from the plan, and, if I am a spouse who is not employed, waive my right to be a beneficiary of a joint or survivor annuity and to exercise all powers with respect to retirement plans that I could if present and under no disability.

My attorney-in-fact is empowered to take all further action, including the payment of expenditures and the preparation and execution of all documents, as my attorney-in-fact deems necessary or appropriate to fully effectuate the purposes of the foregoing matters.

IV. GENERAL PROVISIONS

- 1) Reliance By Third Parties. I hereby agree that any third party receiving a duly executed copy of this document may rely on and act under it. Revocation or termination of this power of attorney will be ineffective as to a third party unless and until that third party receives actual notice or knowledge of the revocation or termination. For myself and for my heirs, executors, legal representatives, devisees, and assigns, I hereby agree to indemnify and hold harmless any third party from any and all claims because of good faith reliance on this instrument.

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- 2) Severability. If any provision in this power of attorney is found to be invalid or unenforceable, this invalidity or unenforceability will not affect the other provisions of this document, and the other provisions will be given effect without the invalid or unenforceable provision.
- 3) Revocation. I may revoke this power of attorney at any time.
- 4) Maintenance of Records; Accounting. My attorney-in-fact shall provide an accounting for all funds handled and all acts performed as my attorney-in-fact upon my request or the request of a personal representative or a fiduciary acting on my behalf and as required pursuant to ILCS 45/2-7. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the court is specifically waived unless required by court order or pursuant to state law.
- 5) Compensation and Reimbursement. My attorney-in-fact is entitled to reasonable compensation for services provided on my behalf pursuant to this power of attorney. My attorney-in-fact will be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this power of attorney.
- 6) Personal Benefit Permitted. If my attorney-in-fact is acting in good faith and in my best interests, my attorney-in-fact may personally benefit or profit from transactions taken on my behalf.
- 7) Liability of Attorney-in-Fact. All persons or entities that in good faith endeavor to carry out the provisions of this power of attorney will not be liable to me, my estate, or my heirs for any damages or claim arising because of their actions or inactions based on this power of attorney. My estate will indemnify and hold them harmless. A successor attorney-in-fact will not be liable for the acts of a prior attorney-in-fact.
- 8) Authority to Record, Register, or File. My attorney-in-fact may record, register, or file this power of attorney and other necessary and appropriate documents as required to carry out the powers granted herein.

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- 9) Copies. A copy of this durable power of attorney shall be effective as an original for all purposes.

IN WITNESS WHEREOF, the undersigned has executed this power of attorney on the date set forth below.

Date: 07/06/2016 Joseph W. Sparks
Signature of Joseph W. Sparks

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WITNESS

The undersigned witness certifies that Joseph W. Sparks, 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 Joseph W. Sparks to be of sound mind and memory.

- Darlene Cornell* Darlene Cornell
(Signature of witness) (Print Name)

1710 N 77th St 2W
(Address)

Chicago, IL 60620
(City, State, ZIP)

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ACKNOWLEDGMENT OF NOTARY PUBLIC

State of Illinois

County of Cook

The undersigned, a notary public in and for the above county and state, certifies that Joseph W. Sparks, 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: 7/6/2016 (SEAL)



Signature of Notary Public: Monique Steward

My commission expires: Sep 16, 2019

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LEGAL DESCRIPTION

LOT 47 IN BLOCK 3 IN HOSMER AND FENN'S SUBDIVISION OF THE NORTH HALF OF THE SOUTHWEST QUARTER OF THE NORTHWEST QUARTER OF SECTION 20, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

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COOK COUNTY
RECORDER OF DEEDS