## **UNOFFICIAL COPY**



Doc# 1808818094 Fee \$48.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 03/29/2018 02:08 PM PG: 1 OF 6

#### **FOWER OF ATTORNEY**

UNITS 1W AND PARKING SPACE P7 IN 3111 NORTH NASHVILLE CONDOMINIUM, AS DELINEATED ON A PLAT OF SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF **REAL ESTATE:** 

LOT 3 (EXCEPT THE SOUTH 16 FEET THEREOF) AND LOT 4 (EXCEPT THE NORTH 20 FEET THEREOF) IN CLARENCE E. NEUBAUM'S RESUBDIVISION OF LOT 8 IN THE SECOND ADDITION TO MONTCLARE GARDENS, SFING A SUBDIVISION OF THE EAST 1/2 OF THE NORTHEAST 1/4 (EXCEPT THAT PART TAKEN FOR RAILROAD) OF SECTION 30, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN:

WHICH PLAT OF SURVEY IS ATTACHED AS EXHIBIT "D" TO THE DECLARATION OF CONDOMINIUM RECORDED MAY 4, 2000 AS DOCUMENT 00315684, TOGETHER WITH ITS UNDIVIDED PERCENTAGE IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS.

Address of Property: 3111 N NASHVILLE AVE UNIT 1W CHICAGO, IL 60634

Parcel ID Number: 13-30-204-053-1001 & 1016

After recording mail to: Altima Title, LLC. 6444 N. Milwaukee Ave. Chicago, IL 60631 Ph. 312-651-6070

Prepared by: Mark A Jaszczuk 422 N. Northwest Hwy Park Ridge, IL 60068

After recording mail to: ANNA WILK AUGUSTA DR CRYSTAL LAKE IL 600/4

1808818094 Page: 2 of 6

#### **UNOFFICIAL COPY**

# ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

(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 IC YOU.)

POWER OF ATTORNEY made this 114 day of october (month) 2017 (year). I, Hance Wilk and Mikelaj Wilk, (insert name and address of principal) hereby appoint:

Bogram Wilk, 935 Augus to Dr. (rysto) Loke II (insert name and address of agent) 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 - of the "Statutery 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 or below:

(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.

1808818094 Page: 3 of 6

### **UNOFFICIAL COPY**

- (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 ransactions.
- (n) Estate transactions.
- (o) All other proper y powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNLY IT THEY ARE SPECIFICALLY DESCRIBED BELOW.)

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

| limited in the following particulars (here you may include any specific limappropriate, such as a prohibition or conditions on the sale of particular stor special rules on borrowing by the agent): | •                |
|--|------------------|
| None 4   | •                |
| 1/3  | <u> </u>         |
|  |                  |
| C  |                  |
| (Q   |                  |
| 4,   |                  |
| In addition to the powers granted above, I grant my agent the following may add any other delegable powers including, without limitation, power to   | mai e gifts,     |
| exercise powers of appointment, name or change beneficiaries or joint  | wrants or revoke |
| or amend any trust specifically referred to below):  | 10               |
| None   | _ 0              |
|  |                  |
|  |                  |
|  |                  |
|  |                  |

(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

1808818094 Page: 4 of 6

#### **UNOFFICIAL COPY**

SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)

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.

(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.)

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

(THIS POWER OF ATTORNLY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AND IN ANY MANNER. ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS FOWER 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:)

| 1 his power of attorney shall become effective on  |
|--|
| October 4, 2017 . (insert a future date  |
| or event during your lifetime, such as court determination of your disability, when you want this  |
| power to first take effect). $\mathcal{H}_{i}$   |
| () This power of attorney shall terminate on  Derrable October 4, 2027 H. Cinsert a future date  |
| or event, such as court determination of your disability, when you want this pover to terminate prior to your death)   |
| (IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)  |
| 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:  Man Ka Ruth 235 August to DE |
| Monika Rut, 935 Augusta DF.  (rystal Lake Tl. 60014 For purposes of this paragraph, 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.  |
| numbers, as defining of a needlest physicials.   |

1808818094 Page: 5 of 6

### **UNOFFICIAL COPY**

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

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. I am fully informed as to all the contents of his form and understand the full import of this grant of powers to my agent.

Signed x Microtar Wille

oind

| (principal) > A 2 2 dec                                 | Wille                   |                               |                                   |
|---|-------------------------|-------------------------------|-----------------------------------|
| (YOU MAY, BUT ARE NOT AGENTS TO PROVIDE SPI             | CLMEN SIGNATUR          | ES BELOW. IF YOU IN           | NCLUDE                            |
| SPECIMEN SIGNATURES                                     |                         |                               |                                   |
| THE CERTIFICATION OPP                                   | OSITE THE SIGNA         | TURES OF THE AGENTS           | .)                                |
|   | 0/                      |                               |                                   |
| Specimen signatures of                                  | $\tau_{\sim}$           | I certify that the signatures | of my agent                       |
| agent (and successors)                                  |                         | (and successors) are corre    |                                   |
|   | (agent)                 |                               | (principal)                       |
|   |                         | 45                            |                                   |
|   | (successor agent)       | 1//                           | (principal)                       |
|   |                         |                               |                                   |
|   | (successor agent)       | ( )                           | (principal)                       |
|   |                         | 0/1                           | · · · · · · · · · · · · · · · · · |
| (THIS POWER OF ATTOR<br>AND SIGNED BY AT LEA<br>BELOW.) |                         |                               | JE FORM                           |
| State of <u>Tlinois</u> )                               | SS.                     |                               | 17/Co                             |
| County of <u>Cook</u>                                   |                         |                               |                                   |
| The undersigned, a notary pu                            |                         |                               |                                   |
| Mikolaj Wilk  | known to me to be the   | same personswhose names is    | subscribed as                     |
| principals to the foregoing power                       | r of attorney, appeared | before me and the addition    | al witness in                     |
| person and acknowledged signi                           | ng and delivering the   | instrument as the free and    | voluntary act of the              |
| principal, for the uses and pu                          |                         |                               |                                   |
| signatura(s) of the amount(s)) D                        |                         |                               | . <del>.</del>                    |

OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires

1808818094 Page: 6 of 6

# **UNOFFICIAL COPY**

| Notary Public   |
|---|
| My commission expires <u>03/11/13</u> . The undersigned witness certifies that Anna Wilk Mikolaj Wilk, known to me to be the same persons whose names is subscribed as principal to |
| Mikolai Wilk, known to me to be the same persons whose names 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: 15 /4 /2017 (SEAL)   |
| Dated: 10/4/2017 (SEAL)  2000 A Sinjer D on O one Witness   |
|   |
| (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.)  |
| This document was prepared by:  |
| mark A Juszczuk   |
| Mark A Jaszczuk<br>412 N. Northwest Haw.<br>Rove Ridge II. 60063  |
| Rove Ridge II. 60063  |
|   |
|   |
|   |
|   |
| $^{4}$ Ox.  |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
| Colling Clarks Office   |
|   |