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Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 06/08/2018 01:15 PM Pg: 1 of 6

# ILLINOIS STATUTORY FOWER OF ATTORNEY FOR PROPERTY 2 0 + 3

PT18\_45537

Prepared by:

Law office of John A. Zimmermann LLC. PO Box 3061 Northlake, IL 60164

> Proper Title, LLC 1530 E. Dundee Rd. Ste. 250 Palatine, IL 60074

-Mail to:

Law office of John A. Zimmermann LLC. PO Box 3061 Northlake, IL 60164

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### ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Power of Attorney made this	_/7_	day of	May	, 2018.
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1. I, **JUDITH K. BROWN**, hereby appoint: **JOHN A. ZIMMERMANN**, 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:

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS YOU DO NOT WANT YOUR ACENT 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 THIS OF THAT CATEGORY.)

(a) Real estate transactions.	(i) Tax matters.
(b) Financial institution transactions.	(j) Claims and litigation.
(c) Stock and bond transactions.	(k) Commodity and option transactions.
(d) Tangible personal property Lansactions.	(I) Business operations.
(e) Safe deposit box transactions — —	(m) Borrowing transactions.
(f) Insurance and annuity transactions.	(n) Estate transactions.
(g) Retirement plan transactions.	(a) All other property powers and
(h) Social Security, employment and	transactions.
military service benefits.	

(LIMITATIONS ON AND ADDITIONS TO THE AGENTS FOWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELCON

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

This Power of Attorney is limited to any and all transactions reizzer to the purchase and closing of the property commonly known as 5444 N. Winthrop Avenue. Unit 2S, Chicago, II. 60640.

3. In addition to the powers granted above, I grant the following powers (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):

(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.

(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.

(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 INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING.)

6. This power of attorney shall become effective on execution date.

7. Of This power of attorney shall terminate upon the purchase and closing of the property commonly known as 5444 N. Winthrop Avenue, Unit 2S, Chicago, II. 60640, but no later than June29, 2018.

(insert a ictive date or event, such as court determination that you are not under a disability or a written determination by your physician that you are not incapacitated, if you want this power to terminate prior to your death)

(IF YOU WISH TO NAME CYLE OR MORE SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLDWING 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 successors 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 nuctors, as certified by a licensed physician. (IF YOU WISH TO, YOU MAY NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT 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 OUR 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 nonlingle 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. (NOTE: This form does not authorize your agent to appear in court for you as an afforney-atlaw or otherwise to engage in the practice of law unless he or she is a licensed afformation who is authorized to practice law in Illinois.)
- 12. The Notice to Agent is incorporated by reference and included as part of this form.

Whith K. BROWN

(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 **JUDITH K. BROWN**, 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.

successor agent under the foregoing power (	or acomey.
Dated: May 17 2018.	Kelii Pondeau
State of NI ) ss County of Alperio	
BROWN known to me to be the same perforegoing power of attorney, appeared	the accire county and state certifies that JUDITH rson whose name is subscribed as principal to before me and the witness(es) in person trument as the fire and voluntary act of the princi
Dated: <u>May 17</u> , 2018	Notary Public My commission expires 3-13-2
(Notary Real NN WOGAMAN Notary Public, State of Michigan County of Alpena My Commission Expires 03-12-2025 Acting in the County of	
(YOU MAY, BUT ARE NOT REQUIRED TO, REQUE SPECIMEN SIGNATURES BELOW. IF YOU INCLUDE YOU MUST COMPLETE THE CERTIFICATION OPPORT	ST YOUR AGENT AND SUCCESSOR AGENTS TO PRODE SPECIMEN SIGNATURES IN THE POWER OF ATTORISTIE 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)

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(successor agent)	(principal)

(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM OR WHO ASSISTED THE PRINCIPAL IN COMPLETING THIS FORM SHOULD BE INSERTED BELOW)

Prepared By: Law Office of John A. Zimmermann, LLC, P.O. Box 3061, Northlake, Il. 60164.

LEGAL DESCRIPTION: Attached.

STREET AL DRESS: 5444 N. Winthrop Avenue, Unit 2S, Chicago, II. 60640.

PERMANENT 7A) INDEX NUMBER: 14-08-204-031-1003, 1010.

(THE SPACE ABOVE IS NOT PART OF OFFICIAL STATUTORY FORM. IT IS ONLY FOR THE AGENT'S USE IN RECORDING THIS FORM WHEN NECESSARY FOR REAL ESTATE TRANSACTIONS

#### **LEGAL DESCRIPTION EXHIBIT A**

UNIT 2S AND P2 IN THE 5444 N. WINTHROP CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED PROPERTY:

LOT 3 IN BLOCK 4 IN JOHN LEWIS COCHRAN'S SUBDIVISION OF THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION 8, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS; WHICH SURVEY IS ATTACHED TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT 0715022062, TOGETHER WITH AN UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS.

Property of Cook County Clerk's Office

Legal Description PT18-45537/89