## UNOFFICIAL COPY

Mail To:

(Leasa J. Baugher
)

725 E. Irving Park Road, Suite B

Roselle, IL 60172



Doc# 1834045010 Fee \$72.00

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

EDHARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

Jany Clary Office

DATE: 12/06/2018 10:32 AM PG: 1 OF 18

**RECORDING COVER PAGE** 

Permanent Parcel Number:

13-19-207-043-0000

**Property Address:** 

6726 W. Berenice Avenue

Chicago, IL 60634

Prepared By: Leasa J. Baugher

725 E. Irving Park Road, Suite B

Roselle, IL 60172

Name

Address

City, State & Zip Code

\*Please note — This cover page has been attached to the document for recording purpose. It is a permanent part of the document and has been included in the page count.

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## Notice to the Individual Signing the Illinois Statutory Short Form Power of Attorney for Property

PLEASE READ THIS NOTICE CAREFULLY. The form that you will be signing is a legal document. It is governed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated "agent" broad powers to handle your financial affairs, which may include the power to pledge, sell, or dispose of any of your real or personal property, even without your consent or any advance notice to you. When using the Statutory Short Form, you may name successor agents, but you may not name coagents.

This form does not impose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will agree to do this for you. It is also important to select an agent whom you trust, since you are giving that agent control over your financial assets and property. Any agent who does act for you has a duty to act in good faith for your benefit and to use due care, competence, and diligence. He or she must also act in accordance with the law and with the directions in this form. You agent must keep a record of all receipts, disbursements, and significant actions taken as your agent

Unless you specifically limit the period of time that this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your lifetime, both before and after you become incapacitated. A court nowever, can take away the powers of your agent if it finds that the agent is not acting properly. You may also revoke this Power of Attorney if you wish.

This Power of Attorney 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.

The powers you give your agent are explained more fully in Section 3-4 of the Illinois Power of Attorney Act. This form is a part of that law. The "NOTE" paragraphs throughout this form are instructions.

You are not required to sign this Power of Attorney, but it will not take effect without your signature. You should not sign this Power of Attorney if you do not understand everything in it, and what your agent will be able to do if you do sign it.

Please place your initials on the following line indicating that you have read this Notice:

Principal's initials)

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## **Illinois Statutory Short Form Power of Attorney for Property**

1. I, Chester Matenko, 6726 W. Berenice Avenue, Chicago, Illinois, hereby revoke all prior powers of attorney for property executed by me and appoint (NOTE: You may not name coagents using this form):

Name:

Lucy Matenko

Address:

6726 W. Berenice, Chicago, Illinois

Telephone:

(773) 286-2448

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.
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- Stock and bond transactions.

  Tangible personal property transactions

  Safe deposit box transactions.

  Insurance and annuity transactions.

  Retirement plan transactions.

  Social Security, employment and military service benefits.

  Tay matters. (h)
- (i)
- (i)
- (k)
- (l) Business operations.
- Borrowing transactions. (m)
- (n) Estate transactions.
- (0)All other property powers and transactions.

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(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)

#### NO LIMITATIONS

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

Authority to Make Gifts. My agent is authorized to pay my pledges to and make such gifts to such individuals, but not to the agent acting under this Power of Attorney, and in such amounts, as my agent, in his or her sole discretion, may deem appropriate, and if my agent determines that such action is not significantly detrimental to my welfare.

Authority to Engage in Financial Transactions. My agent is authorized to engage in financial transactions as agent with himself/herself in his/her individual capacity and I waive on behalf or rivself and my estate all objections to any such transactions. I waive any conflict which may exist or which I have because my agent (who is a fiduciary when acting pursuant to the authority granted by this instrument) also is a beneficiary of my estate and/or otherwise derives some current or future benefit from such financial transactions.

Authority to Renounce and Disclaim. My agent is authorized to renounce and disclaim any property or interest in property or powers to which for any reason and by any means I may become entitled, whether by gift or by testate or intestate succession; my agent is further authorized to release or abandon any property or interest in property or powers which I may now have or hereaster acquire and, in exercising such discretion, my agent may consider, without limitation, such matters as

- the effect of such renunciation or disclaimer upon my estate stibility for estate, inheritance or other death taxes;
- the effect of such renunciation or disclaimer upon persons intereste i in my estate; and
- the effect of such renunciation or disclaimer upon persons who would receive the renounced or disclaimed property.

Authority to Compensate Third Party Agents. My agent is authorized to compensate separately any brokers, attorneys, auditors, depositories, real estate managers, investment advisors and other persons reasonably necessary for my agent under this Power of Attorney to exercise his or her powers.

**Authority to Change Accounts.** My agent is authorized to change any of my accounts, joint or otherwise, by renaming such accounts, removing my name from such accounts or otherwise dealing with any savings, checking or other banking

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or securities accounts with any financial institution or brokerage firm, whether said accounts are in my name alone or in joint tenancy with any other person.

**Trusts.** I authorize my agent to create, fund, amend, modify, or terminate revocable or irrevocable inter vivos trusts; accept transfers or distributions from any trustee of any trust; and add property to an existing or subsequently created trust.

**Estate Transactions.** My agent is authorized to engage in estate transactions, including Receipt, Release and Refunding Agreements and Waivers and Consents.

Authority to establish, contribute to, roll over, or change beneficiary of retirement plan. My agent is authorized to create or to contribute to a Roth IRA, Traditional IRA or Nondeductible IRA or any available employee benefit plan on my behalf or when appropriate, to create or contribute to a plan for a self-employed individual; to select any payment distribution or option under any individual retirement account or employee benefit plan in which I am a participant (including plans for self-employed individuals) or to change options I have selected, so long as such decisions do not result in a change of beneficiary; to make ongoing compulsory or voluntary contributions to such plan; to make "rollovers" of selected plan benefits into other retirement plans; and to make any and all available elections or beneficiary designations on my behalf.

In the event my spouse dies, my agent is authorized to roll over IRA or qualified plan amounts to an IRA or Roth IRA in ray name. Furthermore, my Agent shall have the authority to execute a beneficiary designation form naming beneficiaries (individuals or trusts) as consistent with the dispositive bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent may change the names of beneficiaries of any IRA or qualified plan if a previously-named beneficiary is deceased. My agent shall only tooke changes that are consistent with my bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent may not name himself/herself, his/her estate, or the creditors of either as such new or alternate beneficiary, except to the extent this is consistent with my bequest plan.

My Agent shall have the authority to make any gift, income, estate, or excise election with regard to my qualified plans, IRAs or Roth IRAs including, but not limited to, elections under Sections 401, 402, 408, 408A and 4980A of the Internal Revenue Code of 1986,

My agent shall also have the authority to revoke or modify a TEFRA Section 242(b) election.

Authority to Elect Roth Conversion. My Agent is authorized to convert all or any portion of my qualified plan and/or IRA to a Roth IRA, as defined in IRC Section 408A.

My Agent shall have the authority to execute a beneficiary designation form naming beneficiaries (individuals or trusts) as consistent with the dispositive bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent may change the names of beneficiaries of any IRA or qualified

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plan if a previously named beneficiary is deceased. My Agent shall only make changes that are consistent with my bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent may not name himself/herself, his/her estate, or the creditors of either as such new or alternate beneficiary, except to the extent this is consistent with my bequest plan.

**Safe Deposit Box.** My agent is authorized to enter any safe deposit box or other place of safekeeping standing in my name alone or jointly with another and to remove the contents and to make additions.

Enforcement Proceedings. I authorize my agent to commence enforcement proceedings, at my expense, against any bank, savings and loan association, credit union, financial institution, brokerage firm, stock transfer agent, insurance company, title insurance company, or other person or entity that fails or refuses to honor this aurable power of attorney.

#### Estate and Lorg Term Care Planning. My agent is authorized:

- 1. To engage in estate and long term care planning in furtherance of achieving asset preservation based on all relevant factors, including:
  - a. The value and nature of my property;
  - b. My foresceable obligations and need for maintenance;
  - c. Minimization of taxes, including income, estate, inheritance, generation skipping transfer, and gift taxes;
  - d. Eligibility for a benefit, a program, or assistance under a statute or government regulation.

Property transfers made pursuant to the authority granted herein shall, for all purposes, be deemed to have been "in my best interest" if: (1) made in accordance with the provisions of this section; and (2) made in the context of estate planning, financial planning, Medicaid planning, long term care planning and/or asset preservation planning pursuant to the recommendations of an attorney-at-law experienced in such matters.

- 2. My agent shall take any action necessary to effectuate the foregoing, including qualifying me for Social Security Benefits, Supplemental Security Income, Veterans Benefits, Medicaid or any other government tenefit program. Such actions may include but shall not be limited to the following.
  - a. Convert non-exempt resources into exempt resources:
  - b. Divest me of assets:
  - c. If my agent is my spouse, I authorize my spouse to protect our assets, whether owned by me alone, my spouse alone, or by us together as husband and wife, so that my spouse's impoverishment because of my health care costs can be avoided, by whatever lawful methods that might be available;
    - d. Sign a Spousal Refusal;
    - e. Sign an Assignment of Support;
  - f. Sign an application for Medical Assistance or any other government benefit program;

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- g. Serve as representative payee;
- h. Make home improvements and additions to my family residence:
- i. Pay off, partly or in full, any encumbrance on my family residence;
- j. Purchase a family residence, if I do not own a family residence;
  - k. Purchase a more expensive family residence;
- l. Transfer the family residence to a spouse who does not need long-term health or nursing care;
- m. Divide community property assets equally or unequally between my spouse and me; and
  - 1). Attend and represent me at Fair Hearings.

Nomination of Grardian. I intend hereby to render unnecessary any future proceeding for a court appointed guardian or conservator for me and/or my property in the event i become temporarily or permanently incapacitated or incompetent. Accordingly, I request in the strongest possible terms that any court which may receive or act upon a petition for the appointment of a guardian or conservator of my estate should deay such petition so long as my agent is acting under this Power of Attorney. I direct that if a guardian or conservator of my person and/or property is ever appointed for me in spite of this request that my agent be named as my guardian or conservator. If my agent is unable or unwilling to serve as my guardian or conservator, I nominate the successor agent named in this instrument as my guardian or conservator.

Reimbursement of Health Care Agent. Reimburse my agent under any health care directive, including but not limited to a Durable Fower of Attorney for Health Care, even if such health care agent is my agent, for any costs (including legal fees) reasonably incurred in or as a result of acting pursuant to such Durable Power of Attorney for Health Care.

Authority to Purchase Health Insurance. My agent is authorized to apply for and to purchase health insurance for me and on my behalf.

**Insurance Transactions.** I authorize my agent to engage in insurance transactions, including applying for, maintaining, canceling, paying premiums on, increasing or decreasing, coverage, collecting, borrowing from, transferring ownership, surrendering and/or purchasing insurance policies.

**Annuities.** My agent is authorized to withdraw from, transfer ownership, surrender and/or purchase any commercial annuity, private annuity or grantor retained annuity trust.

Government Agencies and Benefits. My agent has the unrestricted power to deal with and obtain maximum entitlements and benefits relating to the Social Security Administration, Veterans Administration, Social Services Departments, Social Security Disability Insurance, Supplemental Security Income, Medicaid,

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Medicare, Worker's Compensation and all other government benefits or entitlements programs, including claims, planning for eligibility, submission of applications and appeals. In this regard, my agent is authorized to execute and deliver any power of attorney or authorization to act form requested or required by a governmental agency. This power shall impose no affirmative duty on my agent to provide information and/or documentation to any government agency.

Authority to Establish Special Needs Trust. My agent is authorized to establish a Supplemental Needs Trust, an OBRA Trust ((d)(4)(A) Trust ) or a Pooled Payback Trust ((d)(4)(C) Trust) for my benefit.

Intent to Return Home. I hereby express my intention to remain in my home if at all possible, regardless of my physical, emotional or mental condition; If I should be in a hospital, rehabilitation center or nursing home, I hereby express my intention to eturn home, and my agent shall take all steps including, but not limited to, executing any document, affidavit or Declaration of Intent to Stay/Return Home on my behalf, to effectuate the same.

Caregiver Agreements. I authorize my agent to enter into, execute, modify, alter or amend any contract or agreement (for example, a Caregiver Agreement or Personal Services Contract) pertaining to my medical, personal or general care that I may require at my residence, assisted living facility, nursing facility, or in another's residence on my behalf. I expressly authorize my agent to serve as a caregiver under any such agreement and to be paid in accordance with the terms and conditions of such agreement, provided, however, that such services are compensated at fair market value.

Authority to Apply for Reverse Mortgage. My agent is authorized to apply for a reverse mortgage, including but not limited to signing the Mortgage and Note.

Real Estate Transactions, Fixtures and Personalty: I authorize my agent to engage in real estate transactions or transactions which involve any proprietary lease or stock evidencing my ownership of a cooperative apartment, including all fixtures and articles of personal property used in connection with the real property (my agent may include such property in the deeds, mortgages, agreements, and any other instruments to be executed and delivered in connection with real estate transactions and which may be described in said instruments with more particularity).

Loans and Notes. My agent is authorized to conduct all dealings in respect to loans and forgiveness of debts; borrow money on such terms as my agent may decide in his/her sole discretion, on a secured or unsecured basis, and to execute all notes, mortgages and other instruments relating to such, provided such loan carries a fair market interest rate.

#### Authorization to Deal With Tax Authorities. My agent is authorized:

• To deal with tax authorities, to execute and sign on my behalf any and all Federal, state, local and foreign income and gift tax returns (as authorized under Section 1.6012-1(a)(5) of Title 26 of the Code of Federal Regulations or under any state, local, or foreign authority), including

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estimated returns and interest, dividends, gains and transfers, and to pay any taxes, penalties and interest due thereon;

- To represent me or to sign an Internal Revenue Service Form 2848 (Power of Attorney or Declaration of Representative) or Form 8821 (Tax Information Authorization), or comparable authorization, appointing a qualified lawyer, certified public accountant or enrolled agent (including my agent if so qualified) to represent me before any office of the Internal Revenue Service, state, local or foreign taxing authority with respect to the types of taxes and years referred to above, and to specify on said authorization said types of taxes and years;
- To receive from or inspect confidential information in any office of the internal Revenue Service, state, local or foreign tax authority;
- To receive and deposit, in any one of my bank accounts, or those of any revocable trust of mine, checks in payment of any refund of Federal, state, local or foleign taxes, penalties and interest;
- To execute waivers (and offers of waivers) of restrictions on assessment or collection of deficiencies in taxes and waivers of notice of disallowance of a claim for credit or refund;
- To execute consents extending the statutory period for assessment or collection of such taxes; to execute Offers in Compromise and Closing Agreements under Section 7121 or comparable provisions of the Internal Revenue Code, as amended, or any federal, state, local or foreign tax statutes or regulations;
- To delegate authority or to substitute another representative for any one of those previously appointed by me or my Attorney-in-Fact; to sign tax returns and tax powers of attorney; and to receive copies of all notices and other written communications involving my federal state, local or foreign taxes at such address as my agent may designate.

Employment of Professionals. Retain, discharge and pay, in the sole discretion of my agent, for the services of attorneys, accountants, financial planners, geriatric care managers, social workers and any other health care professionals. My agent is not obligated to retain or pay for any health care professional on behalf of the principal.

**Credit Cards.** I authorize my agent to use any credit card in my name; to make purchases on my behalf; to open a new credit card account and to close any existing credit card.

U.S. Mail. I authorize my agent to open, read, respond to and redirect my mail; to represent me before the U.S. Postal Service in all matters relating to mail service.

HIPAA Authorization. All agents and successor agents appointed in this power of attorney shall have the power and authority of a designated representative for all purposes under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 U.S.C. Section 1320d and 45 C.F.R. Parts 160-164. My agent and successor agent are authorized to execute releases and other documents

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necessary to obtain disclosure of individually identifiable health information, medical records, and patient files, including psychotherapy notes. This information includes, but is not limited to, any written opinion or assessment of my decision making capacity. This authorization and release apply to all information protected by HIPAA and shall only expire if I revoke this power of attorney.

#### Access to Medical Records.

- 1. **Authorization to Agent** My agent is authorized to review any information, verbal or written, regarding my physical or mental health, including medical and hospital records, and to execute any releases and/or other documents that may be required in order to obtain such information, and to disclose or deny such information to such persons, organizations, firms or corporations as my agent shall deem appropriate.
- 2. Authorization to Physicians I hereby authorize all physicians and psychiatrists who have treated me and all providers of health care, including hospitals, to release to my agent all information and photocopies of any records which my agent may request. If I am incompetent at the time my agent shall request such information, all persons are authorized to treat any such request for information by my agent as my personal request and to honor such requests on that basis. I hereby waive all privileges which may be applicable to such information and records and to any remmunication pertaining to me that is made in the course of any confidential relationship recognized by law. My agent may also disclose such information to such persons as my agent shall deem appropriate.

(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 paragraph 4, 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 a ting under this power of attorney. Strike out paragraph 5 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 initialing and completing one or both of paragraphs 6 and 7.)

6. This power of attorney shall become effective on the date my agent hereunder determines that I am unable to give prompt and intelligent consideration to financial decisions; such determination shall be made only with the concurring opinion of a physician who has examined or treated me within the last three months.

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(NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability or a written determination by your physician that you are incapacitated when you want this power to take effect.)

7. This power of attorney shall terminate on my revocation of this power of attorney or upon my death, whichever shall first occur.

(NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability or a written determination by your physician that you are incapacitated, when you want this power to first take effect.)

(NOTE: If you wish to name one or more successor agents, insert the name and address of each successor agent in paragraph 8.)

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:

Name: Richard Matenko

Address: 1429 Syracuse Lane, Schaumburg, IL 60193

Telephone: (847) 293-4354

Name: Edward Matenko

Address: 6726 W. Perenice Avenue, Chicago, IL 60634

Telephone: (773) 286-2448

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.

(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 ornd 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 far in Illinois.)

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

Dated: August 21, 2012

Signed:

Chester Matenko, Principal

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(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.)

STATE OF ILLINOIS )
(SS)
(COUNTY OF DUPAGE )

The undersigned, a notary public in and for the above county and state, certifies that Chester Matenko, known to me to be the same person whose name is subscribed to the foregoing document, appeared before me in person and acknowledged signing and delivering the instrument as his free and voluntary act, for the uses and purposes therein set forth.

Dated: August 7.1, 2012

Official Seal Leasa J Baugher Notary Public State of Illinois My Commission Expires 06/03/2014

Leasa J. Baugher, Notary Public

The undersigned witness certifies that Chester Matenko, 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: August 21, 2012

Iwona Zyla

25W331 Foster Avenue

Roselle, IL 60172

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(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 Chester Matenko, 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 at wider; the print of parent sibling. The foregoing power of (d) an agent or successor ag Dated: August 21, 2002 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

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(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 the signatures of my agent (and successors) are genuine.

Lucy Matenko, Agent

Richard Matenko, Successor Agent

Chester Matenko, Principal

Edward Matenko, Successor Agent

Chester Matenko, Principal

(NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form is optional.)

This document was prepared by:

Leas 1 J Baugher

Law Offices of Leasa J. Baugher, Ltd.

805 E. Irving Park Road, Suite C

Roselle, IL 60172 (630) 529-2050

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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, compense, and diligence;
- keep a complete and detailed record of all receipts, disbursements, and significant actions conducted for the principal;
- 4. Learnpt 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 rearn 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 he 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."

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#### Section 3-4 of the Illinois Statutory Short Form Power of Attorney for Property Law

Section 3/4. Explanation of powers granted in the statutory short form power of attorney for property. This Section defines each category of powers listed in the statutory short form power of attorney for property and the effect of granting powers to an agent. When the title of any of the following categories is retained (not struck out) in a statutory property power form, the effect will be to grant the agent all of the principal's rights, powers and discretions with respect to the types of property and transactions covered by the retained category, subject to any limitations on the granted powers that appear on the form. The agent will have authority to exercise each granted power for and in the name of the principal with respect to all of the principal's interests in every type of property or transaction covered by the granted power at the time of exercise, whether the principal's interest are direct or indirect, whole or fractional, legal, equitable or contractual, as a joint tenant or tenant in common or held in any other form; but the agent will not have power under any of the statutory categories (a) through (o) to make gifts of the principal's property, to exercise powers to appoint to others or to change any beneficiary whom the principal has designated to take the principal's interests at death under any will, trust, joir common, beneficiary form or contractual arrangement. The agent will be under no duty to exercise granted powers or to assume control of or responsibility for the principal's property or affairs; but when granted powers are exercised, the agen, will be required to use due care to act for the benefit of the principal in accordance with the terms of the statutory property power and will be liable for negligent exercise. The agent may act in person or through others reasonably employed by the agent for that purpose and will have authority to sign and deliver all instruments, negotiate and enter into all agreements and do all other acts reasonably necessary to implement the exercise of the powers granted

- (a) Real estate transactions. The agent is authorized to: buy, sell, exchange, rent and lease real estate (which term includes, without lin ita'io , real estate subject to a land trust and all beneficial interests in and powers of direction under any land trust); collect all rent sale proceeds and earnings from real estate; convey, assign and accept title to real estate; grant easements, create co ditions and release rights of homestead with respect to real estate; create land trusts and exercise all powers under land trust's, rold, possess, maintain, repair, improve, subdivide, manage, operate and insure real estate; pay, contest, protest and compremise real estate taxes and assessments; and, in general, exercise all powers with respect to real estate which the principal could if present and under no disability.
- (b) Financial institution transactions. The ejent is authorized to: open, close, continue and control all accounts and deposits in any type of financial institution (which term includes, without limitation, banks, trust companies, savings and building and loan associations, cred to nions and brokerage firms); deposit in and withdraw from and write checks on any financial institution account or deposit; and, in general, exercise all powers with respect to financial institution transactions which the principal could if present that the principal could if present that the principal could if present that the principal could if present the principal could in the principal could
- (c) Stock and bond transactions. The agent is authorized to: buy and sell all types of securities (which term includes, without limitation, stocks, bonds, mutual funds and all of certypes of investment securities and financial instruments); collect, hold and safekeep all dividends, interest, earnings, procedus of sale, distributions, shares, certificates and other evidences of ownership paid or distributed with respect to securities; exercise all voting rights with respect to securities in person or by proxy, enter into voting trusts and consent to limitations on the right to vote; and, in general, exercise all powers with respect to securities which the principal could if present and under no disability.
- (d) Tangible personal property transactions. The agent is authorized to: buy and sell, lease, exchange, collect, possess and take title to all tangible personal property; move, store, ship, restore, maintain, repair, improve, manage, preserve, insure and safekeep tangible personal property; and, in general, exercise all powers with respect to tangible personal property which the principal could if present and under no disability.
- (e) Safe deposit box transactions. The agent is authorized to: open, continue and have access to all safe deposit boxes; sign, renew, release or terminate any safe deposit contract; drill or surrender any safe deposit pox; and, in general, exercise all powers with respect to safe deposit matters which the principal could if present and on ler no disability.
- (f) Insurance and annuity transactions. The agent is authorized to: procure, acquire, continue, renew, terminate or otherwise deal with any type of insurance or annuity contract (which terms include, without limitation, life, accident, health, disability, automobile casualty, property or liability insurance); pay premiums or assessments on or surrender and collect all distributions, proceeds or benefits payable under any insurance or annuity contract; and, in general, exercise all powers with respect to insurance and annuity contracts which the principal could if present and under no disability.
- (g) Retirement plan transactions. The agent is authorized to: contribute to, withdraw from and deposit funds in any type of retirement plan (which term includes, without limitation, any tax qualified or nonqualified pension, profit sharing, stock bonus, employee savings and other retirement plan, individual retirement account, deferred compensation plan and any other type of employee benefit plan); select and change payment options for the principal under any retirement plan; make rollover contributions from any retirement plan to other retirement plans or individual retirement accounts; exercise all investment powers available under any type of self-directed retirement plan; and, in general, exercise all powers with respect to retirement plans and retirement plan account balances which the principal could if present and under no disability.

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- (h) Social Security, unemployment and military service benefits. The agent is authorized to: prepare, sign and file any claim or application for Social Security, unemployment or military service benefits; sue for, settle or abandon any claims to any benefit or assistance under any federal, state, local or foreign statute or regulation; control, deposit to any account, collect, receipt for, and take title to and hold all benefits under any Social Security, unemployment, military service and governmental benefits which the principal could if present and under no disability.
- (i) Tax matters. The agent is authorized to: sign, verify and file all the principal's federal, state and local income, gift, estate, property and other tax returns, including joint returns and declarations of estimated tax; pay all taxes; claim, sue for and receive all tax refunds; examine and copy all the principal's tax returns and records; represent the principal before any federal, state or local revenue agency or taxing body and sign and deliver all tax powers of attorney on behalf of the principal that may be necessary for such purposes; waive rights and sign all documents on behalf of the principal as required to settle, pay and determine all tax liabilities; and, in general, exercise all powers with respect to tax matters which the principal could if present and under no disability.
- (j) Claims and litigation. The agent is authorized to: institute, prosecute, defend, abandon, compromise, arbitrate, settle and dispose of any claim in favor of or against the principal or any property interests of the principal; collect and receipt for any claim or settlement proceeds and waive or release all rights of the principal; employ attorneys and others and enter into contingency agreements and other contracts as necessary in connection with litigation; and, in general, exercise all powers with respect to claims and litigation which the principal could if present and under no disability.
- (k) Counodity and option transactions. The agent is authorized to: buy, sell, exchange, assign, convey, settle and exercise commodities futures contracts and call and put options on stocks and stock indices traded on a regulated options exchange and collect and receipt for all proceeds of such transactions; establish or continue option accounts for the principal with any securities or futures broker; and, in general, exercise all powers with respect to commodities and options which the principal could if present and under no disability.
- Business operations. The agent is authorized to: organize or continue and conduct any business (which term includes, whether as a progriet rship, joint venture, partnership, corporation, trust or other legal entity; operate, buy, sell, expand, contract, terminate or liquidate any business; direct, control, supervise, manage or participate in the operation of any business and engage, composate and discharge business managers, employees, agents, attorneys, accountants and consultants; and, in general, exercise all powers with respect to business interests and operations which the principal could if present and under no disability.
- (m) **Borrowing transactions.** The agent 's authorized to: borrow money; mortgage or pledge any real estate or tangible or intangible personal property as security for such proposes; sign, renew, extend, pay and satisfy any notes or other forms of obligation; and, in general, exercise and powers with respect to secured and unsecured borrowing which the principal could if present and under no disability.
- (n) Estate transactions. The agent is authorized to: a cope receipt for, exercise, release, reject, renounce, assign, disclaim, demand, sue for, claim and recover any legacy, bequest, devise, gift or other property interest or payment due or payable to or for the principal; assert any interest in and exacts any power over any trust, estate or property subject to fiduciary control; establish a revocable trust solely for the binefit of the principal that terminates at the death of the principal and is then distributable to the legal representative of the state of the principal; and, in general, exercise all powers with respect to estates and trusts which the principal could if resent and under no disability; provided, however, that the agent may not make or change a will and may not revoke at amend a trust revocable or amendable by the principal or require the trustee of any trust the benefit of the principal to pay income or principal to the agent unless specific authority to that end is given, and specific reference to the trust is made in the statutory property power form.
- (o) All other property powers and transactions. The agent is authorized to: exercise all possible powers of the principal with respect to all possible types of property and interests in property, except to the extent the principal limits the generality of this category (o) by striking out one of more of categories (a) through (n) or by specifying other limitations in the statutory property power form.

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**Legal Description** 

LOT 5 IN PONTARELLI BUILDERS SUBDIVISION UNIT 2, BEING A SUBDIVISION IN THE NORTH EAST 1/4 OF SECTION 19, TOWNSHIP 40 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

# COOK COUNTY RECORDER OF DEEDS

COOK COUNTY
RECORDER OF DEEDS

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