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Edward M. Moody
Cook County Recorder of Deeds
Date: 01/17/2019 08:41 AM Pg: 1 of 3

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2 OF 4

POWER OF ATTORNEY

Prepared by:
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Lockport, IL 60441

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, **MARY M. POE**, hereby revoke all prior powers of attorney for property executed by me and appoint: Frank Vosholler 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:

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

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

None.....
.....
.....

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

None.....
.....

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.

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

6. (X) This power of attorney shall become effective on June 5, 2018

7. (X) This power of attorney shall terminate on Upon Written Revocation

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:

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None

For purposes of 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.

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.

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

Dated: 6-6-18

Signed Mary M. Poe
MARY M. POE

The undersigned witness certifies that **MARY M. POE**, 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: 6/6/18

Signed: Sarah Bratt
(Witness)

State of Illinois) SS.
County of Cook)

The undersigned, a notary public in and for the above county and state, certifies that **MARY M. POE** 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 witness(es) 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, and certified to the correctness of the signature(s) of the agent(s).

Dated: 06-06-18



Christine Plewa
Notary Public