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Edward M. Moody

Cook County Recorder of Deeds Date: 12/12/2019 10:22 AM Pg: 1 of 11

PM9-51776 2053

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY RPK COUNTY CORTES OFFICE **FOR PROPERTY**

Prepared by & Mail to:

Thomas J Dwyer & Associates 400 Lathrop Avenue River Forest IL 60305

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UNOFFICIAL COPY

THOMAS DWYER ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

NOTICE TO THE INDIVIDUAL SIGNING

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 Altorney 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 no ne necessor agents, but you may not name co-agents.

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 elect 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 a it 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 of this form. Your 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, however, 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 premier law in Illinois.

The powers you give your agent are explained more luny in Pection 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 no 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 '' you do sign it.

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

Principal's initials

1. I, THOMAS DWYER, of River Forest, Illinois, hereby revoke all prior powers of attorney for PURCHASE OF PROPERTY LOCATED AT 5420 N. GLENWOOD AVE., CHICAGO, IL 60640, executed by me and appoint:

WILLIAM DWYER, of Chicago, Illinois, (NOTE: You may not name co-agents using this form.)

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 Powe" 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) 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.
- (I) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property transactions.

(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:

-	on or conditions on the sale of particular stock or real estate or special rules of g by the agen ()
-	0
٠	94
-	
In addition	on to the powers granted above, I grant my agent the following powers:
	Here you may add any other delegable payers including, without limitation
	make gifts, exercise powers of appointment, no ne or change beneficiaries or join
tenants of	r revoke or amend any trust specifically referred to be low.)
	See attached Appendix A.
	4,

(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 save 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 acting 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.	IF I INITIAI	LTHIS	BOX [This po	wer of attorne	ey shall be	come effec	tive on:	
	Novem	ber	آ. اـ﴿	12019		•			
						_	_		

(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 vart this power to first take effect.)

	7.	IF I INITIAL "HIS BOX [This power of attorney shall terminate on: December 10, 2019
--	----	--

(NOTE: Insert a future date (r event, such as a court determination that you are not under a legal disability or a written letermination by your physician that you are not incapacitated, if you want this power o terminate prior to your death.)

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

8. If any agent named by me shall die, become incompotent, 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:

MAUREEN MOSKAL, of Midlothian, Illinois

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 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.

(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 law in Illinois.)

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

Dated: 11/21/19

Signed: THOMAS DWYER, Principal

(NOTE: 1'as 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 THOMAS DWYER, 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: 11/21/19

Signed: Grily Parik WITNESS

(NOTE: Illinois requires only one witness, but other jurisdictions my require more than one witness. If you wish to have a second witness, have him or her certify and sign here:)

(Second witness) The undersigned witness certifies that THOMAS DWYER, 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 coluntary 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: 11/21/19

Signed: Kelly Little

WITNESS

State of ILLINOIS)	
County of COOK) SS.)	
known to me to be the attorney, appeared beforeson and acknowled	e same person whose name is some me and the witnesses from ged signing and delivering the	county and state, certifies that THOMAS DWYER, ubscribed as principal to the foregoing power of and Kelly Litzo in instrument as the free and voluntary act of the d certified to the correctness of the signature(s) of
Dated: 11/21/19	"OFFICIAL SEAL" LYNNE M. ROGERS NOTARY PUBLIC, STATE OF ILLINOIS OF COMMISSION EXPIRES 4/2/2022	My commission expires 4/2/2022
provide specim	en sign uvres below. If you incl	uest your agent and successor agents to ude specimen signatures in this power of posite the signatures of the agents.)
Specimen signatures of agent (and successors).	- Of C	I certify that the signatures of my agent (and successors) are correct. Man Duy Principal
Agent	•	Principal
Successor Agent		Principal Office

This document was prepared by: Thomas J. Dwyer & Associates 400 Lathrop Avenue River Forest, IL 60305 (312) 786-5959 www.tjdwyerlaw.com

APPENDIX A to Illinois Short Form Statutory Power of Attorney for Property

This Appendix A attached to and made a part of the Illinois Statutory Short Form Power of Attorney for Property executed by THOMAS DWYER, as principal.

Additions to Paragraph 3:

- (a) My agent is authorized to transfer assets into my revocable living trust, if any.
- (b) My agent is authorized to exercise, in full or in part, any power of appointment given to me.
- made to charitable organizations described in Section 170(c) of the Internal Revenue Code or corresponding provisions of any subsequent federal tax laws; and to make such gifts to persons, or for their benefit, as I have regularly made, plus such amounts to my descendants and their spouses as to which I and my spouse may claim a gift tax annual exclusion under Section 2503(b) of the Internal Revenue Code of 1986, as amended from time to time. My agent is authorized to make all such gifts from any trust of which I am the Grantor or from non-trust assets.
- (d) My agent is authorized to create or change joint tenancies, including the power to sever joint tenancies in which I am one of the joint tenants. My agent is authorized to waive my homestead interest in real estate.
- (e) My agent is authorized to name or change beneficiary designations with regard to my insurance policies, retirement accounts, or any property which I own or in which I have an interest.
- My agent is authorized to exercise all powers I may have over any computer, (f) telephone, digital device, data storage devise, user account, electronically store information, and any domain name, whether the same are in my own name or that I own lawfully use jointly with anyone else; to access, manage, control, delete, and terminate any such asset or account, including, but not limited to e-mail, telephone, bank, brokerage, investment, insurance, social networking, internet service provider, retail vendor, utilities and other accounts, to change my username and password to gain access to such accounts and information; to transfer or withdraw funds or other assets among or from such accounts; and to open new accounts in my name, all as my agent determines is necessary or advisable. I hereby give my lawful consent and fully authorize my attorney to access, manage, control, delete, and terminate any electronically stored information and communications to the fullest extent allowable under applicable federal, state, or international privacy or other laws, and to take any actions I am authorized to take under all applicable terms of service, terms of use, licensing and other account agreements or laws. To the extent a specific reference to any federal, state, local, or international law is required in order to give effect to this provision, I specifically provide that my intention is to so reference such law, whether it is now in existence or comes into existence or is amended after the date of this document.

THOMAS DWYER ()

Date: 11/21/19

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, competence, and diligence;
- (3) keep a complete and detailed record of all receipts, disbursements, and significant actions conducted for the principal;
- (4) attempt 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 learn 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 the 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.

NOTICE TO AGENT FOR POWER OF ATTORNEY FOR PROPERTY THOMAS DWYER

AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY FOR POWER OF ATTORNEY FOR PROPERTY

I, WILLIAM DWYER, certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for THOMAS DWYER.

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I accept appointment as agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.*

Dated:

WILLIAM DWYER

5357 N. Wayne Avenue, Unit 1

11-21-19

Chicago, Illinois 60640

COOP COUNTY nul C. *(NOTE: Perjury is defined in Section 32-2 of the Cri nincl Code of 1961, and is a Class 3 felony.)

SUCCESSOR AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY FOR POWER OF ATTORNEY FOR PROPERTY

I certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for THOMAS DWYER.

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect. I certify that to the best of my knowledge Momas Dwer is unavailable due (specify death, resignation, absence, to illness, or other temporary incapacity). I accept appointment as agent under this power of attorney. a is. This certification and acceptance is made under penalty of perjury.* Dated: Agent Signature William Dwyer AGENT NAME 5357 N. Wayne Ale. AGENT STREET ADDRESS Chicago, 16 lover o AGENT CITY, STATE, ZIP

*(NOTE: Perjury is defined in Section 32-2 of the Criminal Code of 1961, and is a Class 3 felony.)

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Legal Description

Lot 7 And The North 1/4 Of 8 In Block 3 In Zero Park, Being Marx Subdivision Of Blocks 1,2,3 And 4 Both Inclusive Of S. H. Kerfott's Resubdivision Of Lots 1 Through 20 In Louis E. Henry's Subdivision Of The Southwest 1/4 Of The Northwest 1/4 Of Section 8, Township 40 North, Range 14, East Of The Third Principal Meridian, In Cook County, Illinois.

Property of Cook County Clark's Office

Legal Description PT19-54776/77