Doc#. 2000349080 Fee: \$98.00

Edward M. Moody

Cook County Recorder of Deeds
Date: 01/03/2020 09:26 AM Pg: 1 of 7

ILLINOIS STATUTORY
SHORT FORM

POWER OF ATTORNEY FOR PROPERTY

OF A TORNEY FOR PROPERTY

OF A TORNEY FOR PROPERTY

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Prepared by: Ronald H. Harris

Mail to: Law Office of Ronald H. Harris 430 E. 162<sup>nd</sup> Street # 158 South Holland, IL 60473

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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 affeirs, which may include the power to pledge, sell, or dispose of any of your real or personal property, were 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 co-agents.

This form does not innose 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 action good faith for your benefit and to use due care, competence, and diligence. He or she must also set in accordance with the law and with the directions in 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 a you have 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 a ppear in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or and it 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 videout 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.

MRH (Principal's initials)

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

1. I, MICHAEL R. HAMPTON, of 7023 S. Dante Ave., Chicago, IL 60637, hereby revoke all prior powers of attorney for property executed by me and appoint: CARL HAMILTON, of 7023 S. Dante Ave., Chicago, IL 60637, 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:

My Agent CAPL HAMILTON, is authorized to engage in any activities and to sign any documents on my behalf, related to and necessary to effectuate the sale of the property located at:

7627 S. Corrst Ave. Chicago, IL とうかん P.I.N.- 20-25-307-077-0000

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars: No Limitations.
***************************************
3. In addition to the powers granted above, I grant my agent the following powers: No additional Powers
4. My agent shall have the right by written instrument or 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: November 19, 2019
7. (X ) This power of attorney shall terminate UPON THE COMPLETION OF THE 2A/2 OF THE ABOVE-REFERENCED PROPERTY.
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:  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.
November 19, 2019.  Dated:
Signed Michael R. Hampton
(NOTE: This power of effective 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 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 (a) er 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) are therefore, operator, or relative of an owner or operator of a health care facility in which the principal is a patient of exceedent; (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 miletionship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.  November 19, 2019  Dated:  Witness
(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:)  (Second witness) The undersigned witness certifies that known to me to be the same paraon
whose name is subscribed as principal to the foregoing power of attorney, appeared before meand the notary public and acknowledged signing and delivering the instrument as the free and voluntary set 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: 19/2019

State of Illinois County of Cook	) SS. )		
<b>HAMPTON,</b> known to me to power of attorney, appears	io be the same person whose r ad before me and the witness(e	county and state, certifies that MICHAEL name is subscribed as principal to the for es) cknowledged signing and delivering the	r <b>eg</b> oing
<b>instrument</b> as the free and	voluntary act of the principal, for the signature(s) of the agen	or the uses and purposes therein set fort	h (, and
No ary	NALD H. HARRIS FFICIAL SEAL Public, State of Minois Typnic sion Expires	Mell Hill Notary Public	mis
(NOTE: You may, but are r signatures below. If you inc certification opposite the sign	dude specimen signatures in th	gent and successor agents to provide spenis power of attorney, you must complete	inen the
Specimen signatures of agent (and successors)	5) °4C	I certify that the signature of my agent (and success are genuine.	
Carl Hamilton (agent)		Michael R. Hampton (Prince	::[2407 ( :::[:2407 ( :::[:2407 (
(successor agent)		(principal)	*******
(successor agent)		(principal)	******
This Document was pr	epared by:		
Ronald H. Harris Law Office of Ronald I 430 E. 162 <sup>nd</sup> St. # 158 South Holland, IL 6043 (708) 805-0351	}		9

#### "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 or id/cted for the principal;
- (4) artempt 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) cooperain 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 actualty in the principal's best interest As again 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 Aponts
  - (2) do any act beyond the authority granted in this power of attorney;
  - (3) commingle the puncipal's funds with your funds;
  - 4) borrow funds or other property from the principal, unless otherwise authorized;
  - (5) continue acting on being of the principal if you learn of any event that terminates this power of attorney or your audicately under this power of attorney, such as the death of the principal, your legal separation from all 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 when we 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:

MICHAEL R. HAMPTON "

by CARL HAMILT ON

as Agent"

The meaning of the powers granted to you is contained in Section 3-4 of the Mincis 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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### **EXHIBIT A**

Order No.: CH19019476

For APN/Parcel ID(s): 20-25-309-037-0000 For Tax Map ID(s): 20-25-309-037-0000

THE NORTH'S FEET 8 INCHES OF LOT 23 AND LOT 24 (EXCEPT THE NORTH 4 INCHES THEREOF) IN BLOCK 10 IN THE RESUBDIVISION OF LOTS 9 AND 10 IN JAMES STINSON'S Phy Or Coot County Clart's Office SUBDIVISION OF EAST GRAND CROSSING IN THE SOUTHWEST 1/4 OF SECTION 25, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK

COUNTY, ILLINOIS.