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IL STATUTORY SHORT FORM POWER OF ATTORNEY



Doc# 2005708383 Fee \$88.00

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 02/26/2020 02:39 PM PG: 1 OF 9

LLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Kacy McGarigle-Struve of 330 E	. 29 th St.,	Apt.	6N,	New '	York,
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1. I, NY 10016

(insert name and address of principal)

Hereby revoke all prior powers of attorney for proporty executed by me and appoint:

Justin Strane, 53 W. Jackson Blvd., Ste. 1760, Chicago, IL 60604

(insert name and address of agent)

(NOTE: You may not name co-agents using this form.) as ny 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 canendments), 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 750 OFFICE 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.
- Tangible personal property transactions. (D)

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- (E) Safe deposit box transactions.
- (F) Insurance and annuity transactions.
- Retirement plan transactions. (G)
- (H) Social Security, employment and military service benefits.
- (I) Tax matters
- (U) Claims and litigation.
- (K) Commodity and option transactions.
- (L) Business operations.
- (M) Borrowing transactions.
- (N) Estate transactions.
 - (0)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.)

2005708383 Page: 2 of 9

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2. The powers granted above shall not include the following powers or shaparticulars: (NOTE: Here you may include any specific limitations you deconditions on the sale of particular stock or real estate or special rules on bo	em appropriate, such as a prohibition or
None	rowing by the agent.)
3. In addition to the powers granted above, I grant my agent the following other delegable powers including, without limitation, power to make gifts, e change beneficiaries or joint tenants or revoke or amend any trust specifically All powers necessary to close on the purchase of 1039 W. Grace St., Unit	xercise powers of appointment, name or referred to below.)
(NOTE: Your agent will have authority to employ other persons as necessary the powers granted in thir form, but your agent will have to make all discreti agent the right to delegate discretionary decision-making powers to others, y should be struck out.)	onary decisions. If you want to give your
4. My agent shall have the right 'yy written instrument to delegate any of discretionary decision-making to any rerson or persons whom my agent ramended or revoked by any agent (including any successor) named by me wat the time of reference.	nay select, but such delegation may be
(NOTE: Your agent will be entitled to reimbursem and for all reasonable expensationney. Strike out paragraph 5 if you do not want your agent to also be services as agent.)	ses incurred in acting under this power of entitled to reasonable compensation for
5. My agent shall be entitled to reasonable compensation for services render	ed as agent under this power of attorney.
(NOTE: This power of attorney may be amended or revoked by you at any time or revocation, the authority granted in this power of attorney will become effective attorney until your death, unless a limitation on the beginning date or duration on the paragraphs 6 and 7.)	ctive at the time this power is signed and
6. This power of attorney shall become effective on February 2	0, 2020
(NOTE: Insert a future date or event during your lifetime, such as a court de determination by your physician that you are incapacitated, when you want the	termination of your disability or a written is power to first take effect.)
7. This power of attorney shall terminate on February 2	5, 2020
(NOTE: Insert a future date or event, such as a court determination that you a determination by your physician that you are not incapacitated, if you want thi (NOTE: If you wish to name one or more successor agents, insert the name paragraph 8.)	s power to terminate prior to your death)
If any agent named by me shall die, become incompetent, resign or refuse following (each to act alone and successively, in the order name	to accept the office of agent, I name the d) as successor(s) 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 matters, as certified by a licensed physician.

2005708383 Page: 3 of 9

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(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: Signed: (Principal)	
(Dringinal)	
(Fillicipal)	
(NOTE: This power of actioney will not be effective unless it is signed by at least one witness and your sign	oturo i
notarized, using the form back. The notary may not also sign as a witness.)	ature i
, may me and a sign and a similar sign	
The undersigned witness cerufies that Kacy McGarigle-Struve known to me to	ha tha
same person whose name is subscriber as principal to the foregoing power of attorney, appeared before me	
notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and voluntary act of the principal to the instrument as the free and the instrument as	and un inal fo
the uses and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned	witnes
also certifies that the witness is not: (a) the atteriding physician or mental health service provider or a relative	e of the
physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which	hich the
principal is a patient or resident; (c) a parent, sibling coscendant, or any spouse of such parent, sibling, or described the sible of such parent, sibling coscendant, or any spouse of such parent, sibling, or described the sible of such parent, sibling coscendant, or any spouse of such parent, sibling coscendant, sibling co	cendan
of either the principal or any agent or successor agent und at the foregoing power of attorney, whether such relationships and of the principal or and other such relationships are adopting and adopting and adopting and adopting and adopting and adopting are adopting and adopting and adopting and adopting and adopting and adopting and adopting are adopting and adopting and adopting and adopting and adopting and adopting a such adopting and adopting a such adopting and adopting and adopting a such adopting a such adopting a such adopting and adopting a such adopting	tionshi
is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.	
Dated: 02/14/70 Signed: M/06/01 6	
(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:)	LOTIAVE
(Second witness)	
The undersigned witness certifies that Kacy McGarigle-Struve known to me to	he the
same person whose name is subscribed as principal to the foregoing power of atterney, a weared before me	and the
notary public and acknowledged signing and delivering the instrument as the free and voluntar cas' of the princ	inal fo
the uses and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned	witnes
also certifies that the witness is not: (a) the attending physician or mental health-service provide co. a relative) of th e
physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care to all to in wi	nich th
principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or unso of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relat	endan
is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.	lonsni ļ
Dated: Signed:	
(Witness)	
(
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2005708383 Page: 4 of 9

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STATE OF NEW YORK, COUNTY OF Many Jock) SS

The undersigned, a notary public in and for the above county and state, certifies that Kacy McGarigle-Struve known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and witness(es) Wrelaw (and ________) 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: My commission expires: (NOTE: The name, addies, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.) Justin C. Strane Name: Coot County Clart's Office 53 W. Jackson Blvd., Ste. 1760 Address: Chicago, IL 60604 Phone: (312) 391-7788

2005708383 Page: 5 of 9

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Text of Section after amendment by P.A. 96-1195)

Sec. 3-3. Statutory short form power of attorney for property.

- (a) The form prescribed in this Section may be known as "statutory property power" and may be used to grant an agent powers with respect to property and financial matters. The "statutory property power" consists of the following: (1) Notice to the Individual Signing the Illinois Statutory Short Form Power of Attorney for Property; (2) Illinois Statutory Short Form Power of Attorney for Property; and (3) Notice to Agent. When a power of attorney in substantially the form prescribed in this Section is used, including all 3 items above, with item (1), the Notice to Individual Signing the Illinois Statutory Short Form Power of Attorney for Property, on a separate sheet (coversheet) in 14-point type and the notarized form of acknowledgment at the end, it shall have the meaning and effect prescribed in this Act.
- (b) A power of attorney shall also be deemed to be in substantially the same format as the statutory form if the explanatory language throughout the form (the language following the designation "NOTE:") is distinguished in zome way from the legal paragraphs in the form, such as the use of boldface or other difference in type ace and font or point size, even if the "Notice" paragraphs at the beginning are not on a separate sheet or parer or are not in 14-point type, or if the principal's initials do not appear in the acknowledgement at the end of the "Notice" paragraphs.

The validity of a power of attorney as meeting the requirements of a statutory property power shall not be affected by the fact that one or more of the categories of optional powers listed in the form are struck out or the form includes specific limitations on or additions to the agent's powers, as permitted by the form. Nothing in this Article shall invalidate or bar use by the principal of any other or different form of power of attorney for property. Nonstatutory property powers (i) must be executed by the principal, (ii) must designate the agent and the agent's powers, (iii) must be signed by at least one witness to the principal's signature, and (iv) must indicate that the principal has acknowledged his or her signature before a notary public. However, nonstatutory property powers need not conform in any other respect to the statutory property power.

- (c) The Notice to the Individual Signing the Illinois Statuto y Short Form Power of Attorney for Property shall be substantially as follows:
- (d) The Illinois Statutory Short Form Power of Attorney for Property shall be substantially noted on page 5.
- (e) Notice to Agent. The following form may be known as "Notice to Agent" and shall be supplied to an agent appointed under a power of attorney for property

"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 picperty;
- (2) act in good faith for the best interest of the principal, using due care, competence, and di gence;
- (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;

2005708383 Page: 6 of 9

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(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 damager, 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 atterney."

(f) The requirement of the signature of a witness in addition to the principal and the notary, imposed by Public Act 91-790, applies only to instruments executed on or after June 9, 2000 (the effective date of that Public Act).

(NOTE: This amendatory Act of the 96th General Assembly deletes provisions that referred to the one required witness as an "additional witness", and it also provides for the signature of an optional "second witness".) (Source: P.A. 96-1195, eff. 7-1-11.)

2005708383 Page: 7 of 9

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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 powe's 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 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 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. 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 incapecitated. 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 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.

2005708383 Page: 8 of 9

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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 Proporty of Cook County Clark's Office this Notice:

Principal's initials

OUNTY CLOTT'S

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LEGAL DESCRIPTION:

Situated in the County of Cook, State of Illinois, to wit:

Parcel 1:

Unit No. 1 in the 1039 West Grace Condominium, as delineated on a Plat of survey of the following described real estate:

Lot 8 in Block 3 in Buckingham's 2nd Addition to Lakeview a Subdivision of all of Block 1 and parts of Blocks 10 and 12 (except railroad) of Laflin, Smith and Dyer's Subdivision of Section 20, Township 40 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois; which Plat of survey is attached as exhibit 'A" to the Declaration of Condominium recorded May 30,2007 in the Office of the Recorder of Deeds of Cook County, Illinois as Document No. 0715015058, as amended from time to time, together with its undivided percentage interest in the common elements, in Cook County, Illinois.

Parcel 2:

The exclusive right to the use of P-1, S-1, garage roof rights and the rear porch, limited common elements, as delineated on the Plat of su ver attached to the declaration, aforesaid, recorded as Document No. 0715015058, and the rights and easements for the benefit of Unit 1, as are set forth in the declaration; the grantor reserves to itself, its successors and/or assigns, the rights and easements as set forth in said declaration for the remaining land described therein.

PROPERTY ADDRESS:

1039 West Grace Street, Unit 1, Chicago, IL 60613

PERMANENT INDEX NUMBER:

14-20-218-053-1001