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STATE OF ILLINOIS

COUNTY OF COOK

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.Doc# 2018947028 Fee \$88.00

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

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 07/07/2020 11:36 AM PG: 1 OF 5

LAND TRUST DEPARTMENT LT

GENERAL POWER OF ATTORNEY

I, ELENORE I. KRASOWSKI, residing at 10215 S. 82nd Avenue, Palos Hills, Illinois, hereby appoint my daughter, DEBORAH A. WRIGHT, of 6%32 W. 127th Street, Palos Heights, IL, 60463 as my Attorney-in-Fact ("Agent").

If my Agent is unable to serve for any reason, I designate my son, Stephen A. Krasowski, Jr., of Walkerton, Indiana, as my Successor Agent.

My Agent shall have full power and authority to act on my behalf. This power and authority shall authorize my Agent to manage and conduct all of my affairs and to exercise all of my legal rights and powers, including all rights and powers that I may acquire in the future. My Agent's powers shall melide, but not be limited to, the power to:

- 1. Open, maintain or close bank accounts (including, but not limited to checking accounts, savings accounts, and certificates of deposit), brokerage accounts, and other similar accounts with financial institutions.
 - a. Conduct any business with any banking or financial institution with respect to any of my accounts, including but not limited to, making deposits and withdrawels obtaining bank statements, passbooks, drafts, money orders, warrants, and certificates or vouchers payable to me by any person, firm, corporation or political entity.
 - b. Perform any act necessary to deposit, negotiate, sell or transfer any note, security, or draft of the United States of America, including U.S. Treasury Securities.
 - c. Have access to any safety deposit-bexchard might own, including its contents.
- 2. Sell, exchange, buy, invest, or reinvest any assets or property owned by me. Such assets or property may include income producing or non-income producing assets and property.
- 3. Purchase and/or maintain, insurance, including life insurance upon my life or the life of any other appropriate person.
- 4. Take any and all legal steps necessary to collect any amount or debt owed to me, or to settle any claim, whether made against me or asserted on my behalf against any other person or entity.
- 5. Enter into binding contracts on my behalf.
- 6. Exercise all stock rights on my behalf as my proxy, including all rights with respect to stocks, bonds, debentures or other investments.

Initials: 2 K

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- 7. Make gifts and/or donations on my behalf.
- 8. Employ professional and business assistance as may be appropriate, including attorneys, accountants, and real estate agents.
- 9. Sell, convey, lease, mortgage, manage, insure, improve, repair, or perform any other act with respect to any of my property (now owned or later acquired) including, but not limited to, real estate and real estate rights (including the right to remove tenants and to recover possession). This includes the right to sell or encumber any homestead that I now own or may own in the future.
- 10. Prepare, sign, and file documents with any governmental body or agency, including but not limited to, authorization to:
 - a. Prepare, sign and file income and other tax returns with federal, state, and local and other governmental bodies.
 - b. Obtain information or documents from any government or its agencies, and negotiate, compromise, or settle any matter with such government or agency (including tax matters).
 - c. Prepare applications, provide information, and perform any other act reasonably requested by any government or its agencies in connection with governmental benefits (including military and social security benefits).
- 11. Transfer any of my assets of the trustee of an revocable trust, including any land trust, created by me, if such trust is in existence at the time of such transfer.
- 12. Disclaim any interest which might otherwise be transferred or distributed to me from any other person, estate, trust, or other entity, as may be appropriate.

This Power of Attorney shall be construed broadly as a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, and (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith.

However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney.

My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable expenses incurred in connection with this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent, if I so request or if such a request is made by any authorized personal representative or fiduciary acting on my behalf.

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.

Initials: £.K.

This Power of Attorney shall be one effective immediately, I all not be effected by my disability or lack of mental competence, and shall continue effective until my death; provided, however, that this Power may be revoked by me at any time by providing written notice to my Agent.

BEFORE SIGNING THIS DOCUMENT, I, AS GRANTOR, HAVE CONSIDERED ITS CONSEQUENCES. I UNDERSTAND THAT I AM PROVIDING ANOTHER PERSON (THE AGENT) WITH THE POWER TO HANDLE BUSINESS AND LEGAL MATTERS ON MY BEHALF. I AM FULLY INFORMED AS TO ALL THE CONTENTS OF THIS FORM AND UNDERSTAND THE FULL IMPORT OF THIS GRANT OF POWERS. ANY SUCH ACTION UNDERTAKEN BY THE AGENT WITHIN THE SCOPE OF THE POWER OF ATTORNEY DOCUMENT IS LEGALLY BINDING UPON THE GRANTOR.

IN WITNESS WHEREOF I have signed this Power of Attorney this 30 day of March, 2009	١.
Signature: Llenore J. Krasowski	
Elenore I. Krasowski	
State of Illinois)	
County of Cook)	
On this that Elenore I. Krasowski knowr to me to be the same person whose name is subscribed as principal the foregoing power of attorney, appeared before me and the additional witness, in person and acknowledged signing a delivering the instrument as her free and voluntary act, for the uses and purposes therein set forth.	to
My Commission expires: OFFICIAL SEAL JON A MICHAL	
Notary Public NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:09/03/09	
The undersigned witness certifies that Elenore I. Krasowski known to me or proven to me to be the same person who name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public as acknowledged signing and delivering the instrument as her free and voluntary act, for the uses and purposes therein s forth. I believe her to be of sound mind and memory.	a d
Witness C. Wallon residing at 570 6 70 70 70 70 70 70 70 70 70 70 70 70 70	y
Witness name (printed) Dak Lawn, FL, 60453	

This document was prepared by:

Deborah A. Wright/Wright & Wright Law, P.C. 12309 S. Harlem Avenue, Suite 8
Palos Heights, IL 60463
(708) 923- 9496

Initials:

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LEGAL DESCRIPTION

THE SOUTH HALF OF LOT 58 IN FRANK DELUGACH'S 103RD STREET MANOR, BEING A SUBDIVISION OF THE SOUTHEAST QUARTER OF SECTION 11, TOWNSHIP 37 NORTH, RANGE 12, EAST OF THE THIRD

SOUTI, IOR, BEIN, STION 11, TU (INCIPAL MERIDIA.

Jemmonly known as 10215

PIN: 23-11-405-022-0000

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AFFIDAVIT FOR RECORDER'S LABELING OF SIGNATURES AS COPIES

REQUEST TO RECORD PHOTOCOPIED DOCUMENTS PURSUANT TO §55 ILCS 5/3-5013

I KELLI A WYZYKOWSKI	, being duly sworn, state tha	t I have access to the copies of the attached		
(print name above)				
document(s), for which I am list	ting the type(s) of document(s) below:		
Power of Attorney				
(print document types on the above Hele)				
which were onginally executed by the following parties whose names are listed below:				
Elenore I Kro	Soushi	(print name(s) of executor/grandee)		
(print name(s) of execut	or/grantor)	(print name(s) or executorigramee)		
for which my relationship to the	document(s) is/are as follow	s: (example - Title Company, Agent, Attorney, etc.)		
	Ox			
truske (of those property	y 15 being deided into		
	(print your relationship to the document	ment(s) on the above line)		
	OATH REGARDING O	RIGINAL		
I state under oath that the original of this document is row OST or NOT IN POSSESSION of the party seeking to				
now record the same. Furthermore, to the best of my knowledge, the original document was NOT INTENTIONALLY				
destroyed, or in any manner <u>DISPOSED OF</u> for the purpose of introducing this photo to be recorded in place of				
original version of this document. Finally, I, the Affiant, swear I have personal knowledge that the foregoing oath				
statement contained therein is bot	th true and accurate.	3		
	\ ,			
)	June 25, 2000		
	/			
Affiant's Signature	Above	Dat: / mdsvit Executed/Signed		
		Dat∴ / mid⊆vit Executed/Signed AFFIDAVIT WAS SUBSCRIBED AND SWORN TO BEFORE		
THE BELOWSECTION IS TO BE COM	MPLETED BY THE NOTARY THIS	AFFIDAVIT WAS SUBSCRIBED AND SWORN TO BEFORE		
	MPLETED BY THE NOTARY THIS	"OFFICIAL SEAL"		
THE BELOWSECTION IS TO BE COM	MPLETED BY THE NOTARY THIS	"OFFICIAL SEAL" LAUREL D. THORPE AND SWORN TO BEFORE Notary Public, State of Illinois		
THE BELOWSECTION IS TO BE COM	MPLETED BY THE NOTARY THIS	**************************************		

SPECIAL NOTE: This is a courtesy form from the CCRD, and while a similar affidavit is necessary for photocopied documents, you may use your own document so long as it includes substantially the same information as included in the above document. Additionally, any customer seeking to record a facsimile or other photographic or photostatic copy of a signature of parties who had executed such a document has the option to include this Affidavit in the recording, at their own expense if such expense is incurred, as an "EXHIBIT" and NOT the coverpage. However, this affidavit is NOT required to be recorded, only presented to the CCRD as the necessary proof required before the recorder may record such a document. Finally, the recorded document WILL be stamped/labeled as a copy by the CCRD prior to its recording.