**FIRST AMERICAN TITLE** FILE # 3053769

Doc#. 2036412087 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 12/29/2020 11:48 AM Pg: 1 of 4

DOOD OF CO. SPECIAL POWER OF ATTORNEY SOUNTY CLERT'S OFFICE

Prepared by /Return to:

Almira Sapitula

2254 Greenfield Dr

Glenview, IL 60025

#### SPECIAL POWER OF ATTORNEY

KNOW ALL ME BY THESE PRESENT, THAT I, Almira Sapitula, (Principal) currently residing at 4154 Cove Lane, Glenview, Illinois 60025, desire to execute a SPECIAL POWER OF ATTORNEY, hereby appoint my husband, Sun Im currently residing at 4154 Cove Lane, Glenview, Illinois 60025 or his or her representative, as my Attorney-in-Fact to act as follows, GRANTING unto said Attorney-in-Fact full power to Execute any and all documents necessary to close on the sale, short sale, purchase or refinance of the property described below, commonly known as 2254 Greenfield Dr., Glenview, Illinois 60025, with full power and authority for me and in my name to execute any and all documents necessary to effect the sale, release of liens, or purchase, conveyance, financing, refinancing and settlement on said property to any person or persons of his/her choosing, including but not limited to, sales contracts and addiendum thereto, negotiable instruments, mortgages, deeds or other instruments of conveyance, disclosure statements, short sale approval letters, closing or settlement statements, atc., FURTHER GRANTING full power and authority to collect and receive any funds or proceeds of said sale in any manner which in his/her sole discretion, he/she sees fit.

The legal description of the land commonly known as 2254 Greenfield Dr., Glenview, Illinois 60025, is as attached hereto. The PIN number is 09-12-301-036-0000.

All acts done by means of this power shall be done in my name, and all instruments and documents executed by my Attorney-in-Fact horounder shall contain my/our names, followed by that of my Attorney-in-Fact and the description "Attorney-in-Fact", excepting however any situation where local practice differs from the procedure set forth herein, in that event local practice may be followed. This SPECIAL POWER OF ATTORNEY shall be valid and may be relied upon by any third parties until such time as any revocation is recorded in the recorder's office of the county where the land is located.

IN WITNESS WHEREOF, the undersigned have executed this document on the date set forth below.

Dated:

Almira Sapitula

Lic. N. 5134-0028-3671

The undersigned witness certifies that **Almira Sapitula**, 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 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 the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; of (d) an agent or successor agent under the foregoing power of attorney.

| power of attachey, whether such relationship is by bor successor agent under the foregoing power of at   |  |
|--|--|
| Mas for  |  |
| Witness  |  |
| Mark Johnson   |  |
| Print Name   |  |
| State of Hundis'   | $\frac{\partial u}{\partial x} = \frac{\partial u}{\partial x} \frac{\partial u}{\partial x} = \frac{\partial u}{\partial x} \frac{\partial u}{\partial x} \frac{\partial u}{\partial x} + \frac{\partial u}{\partial x} + \frac{\partial u}{\partial x} \frac{\partial u}{\partial x$ |
| County of COOK   |  |
| 1. Laila Hasan   | , a Notan Public in and for said County and  |
| State, do hereby certify that Almira Sapitula, person<br>whose name is subscribed to the foregoing instrum-<br>and acknowledged that he signed and delivered the   | ent, appeared before me this day in person   |
| act, for the purposes and therein set forth.   | 'S, -  |
| Given under my hand and official seal, this $28$   | day of, 2020.  |
| Notary Public \$   | ······································   |
|  | OFFICIAL SEAL LAILA HASAN NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES 100001   |
| a a constant of the constant o | MY COMMISSION EXPIRES:04/02/22   |

#### LEGAL DESCRIPTION

LOT 14 IN BLOCK 2 IN GLENVIEW PARK MANOR UNIT NUMBER 6, BEING A SUBDIVISION OF PART OF THE NORTHEAST 1/4 OF THE SOUTHWEST 1/4 AND THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 12, TOWNSHIP 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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