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Doc# 2127249009 Fee \$93.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 09/29/2021 10:07 AM PG: 1 OF 15

Recording Requested By:
FNC Title Services

When Recorded Return to:
FNC Title Services, LLC
1300 Piccard Drive, Suite 105
Rockville, MD 20852

2021-05-319

Property of Cook County Clerk's Office

POWER OF ATTORNEY

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P 15
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DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, THAT I,

Dollie O White

of

Chicago Heights, Illinois

do hereby make, constitute and appoint as my Attorney-in-Fact

Jacqueline Caple

For me in my name, place and stead, I hereby authorize my Attorney-in-Fact to act (and if more than one Attorney-in-Fact is named, to act independently of each other, without the approval, authorization or consent of the other) as follows:

To bargain, sell and convey in fee simple by deed with or without covenants of general warranty, or other covenants usual or customary in a warranty deed, or by land contract for such price and upon such terms of credit, and to such person or persons, as my said Attorney shall think fit, the whole or any part of any lands, tenements or hereditaments owned by me, or any interest therein, of any real estate wheresoever situated, and all after acquired real estate.

To pay and satisfy all mortgages, encumbrances, taxes and assessments that may be a lien or charge on any of said lands, tenements or hereditaments.

To borrow money from any person, firm or corporation on terms and conditions deemed appropriate by the attorney-in-fact, and to obligate my property, real or personal, for repayment; to encumber assets by mortgage, deed of trust, pledge or otherwise, using whatever procedures to consummate the transaction; to replace, renew or extend any such encumbrance.

Initialed: 

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To make gift transfers, in any amounts, of any of my assets, to my spouse and/or to any one or more of my descendants (if any), the spouses of my descendants, the surviving spouse of my descendants, and any organizations to which gifts are deductible for the purpose of determining federal gift taxes, and my Attorney-in-fact may make gifts on my behalf to himself or herself, so long as my Attorney-in-fact is one of the individuals within the class described above; provided, however, that should there be a will in existence, then the Attorney-in-fact shall make such gifts to the residuary or primary beneficiaries in the same proportion as stated in the will, unless the Attorney-in-fact shall receive written waivers from said beneficiaries to make a different distribution.; provided further, that my Attorney-in-fact shall not be permitted to satisfy or discharge any of his or her legal obligations with any of my property.

To receive payment of the purchase money of any and all lands so sold, and of any and all promissory notes, bonds or other obligations received as evidence of the indebtedness or in payment therefor, and to satisfy and discharge any and all mortgages securing said purchase moneys.

To receive from any company in which I own any shares of common and/or preferred stock and/or bonds to be issued in my name, and to receipt therefor on the stock books of said corporations, and to sign any document, proxy and regulation which may be required by said corporations.

To sell, assign, transfer, and set over all or any portion of the shares and/or bonds of said companies, and for that purpose, to make, execute and deliver all necessary acts of assignment and transfer, including any affidavit, which may be required, and to receive payment of the purchase money therefor, and to endorse, collect and receive payment of any and all checks, drafts, or other media representing such purchase money.

To withdraw, in whole or in part, and from time to time from any bank in which I may have funds all moneys now or hereafter on deposit in my name in said bank, to sign my name to checks, upon said bank for the purpose of withdrawing said deposits, to make deposits in said bank and for that purpose to endorse my name upon checks, drafts, bills of exchange, promissory notes and other commercial paper drawn to my order.

To transact any and all business, directly or indirectly, with any bank in which I have funds; to deposit and withdraw moneys therein and therefrom and for such purposes to draw, sign, execute, endorse and accept checks, bills of exchange, trade acceptances, money market certificates and certificates of deposit, promissory notes and all other kinds and forms of commercial paper; to waive demand, notice and protest of any and all such checks, bills of exchange, trade acceptances, money market certificates and certificates of deposit, promissory notes and other commercial paper.

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To receive and receipt for all dividends which are or shall be payable on the shares and/or bonds now standing in my name or which may hereafter be issued to me.

To direct a bank to pay any checks, drafts, notes, bills of exchange trade acceptances and other commercial paper signed, accepted or endorsed by my said Attorney, and to receive the same for the credit of or in payment from the payee or any holder issued, or the application or disposition of the proceeds thereof, whether the same are made payable to my said Attorney individually or presented in payment of my said Attorney's individual obligations or otherwise.

To open 401(k), 403(b), Individual Retirement Accounts (IRAs) or other qualified retirement plans or accounts and establish beneficiaries therefor, and to change, modify and close, or to take other such action as is deemed necessary and prudent regarding any such accounts.

To sell, assign, transfer, convey and deliver any and all bonds, stocks, promissory notes, bills of exchange, trade acceptances and other commercial paper, book accounts, money market certificates, claims, demands and courses in action, certificates of equitable or beneficial interest and any other like property for such prices and on such terms as my said Attorney shall deem best.

Subject to any Living Will, Advanced Directive or other similar document that may be then effective, to take charge of my person in case of sickness or disability of any kind, and to remove and place me in such institutions or places as she may deem best for my personal care, comfort, benefit and safety; and for said purposes to use and disburse any or all of said bank deposit moneys, and other personal property.

To act on my behalf with respect to any and all federal and/or state taxes in which I am concerned or interested, and for that purpose to appear before the Commissioner of Internal Revenue, and/or any of the agents, units, branches, divisions, committees or other officers of the Internal Revenue Service and/or the Tax Court of the United States, and/or the District Director of Internal Revenue and/or Department of Taxation located in any State within the United States; to sign my name to, execute, seal, acknowledge and deliver any consent or consents, including but not limited to, consents agreeing to a later determination and assessment of taxes than is provided by the statute of limitations, any stipulation or stipulations, waiver or waivers of the statute of limitations, notice or notices, bond or bonds, closing agreement or agreements relative to the tax liability, and other writings or agreements of any kind or nature which my said Attorney may deem necessary or proper in the premises, and to prosecute any claim or claims for refund of federal taxes; with authority to receive but not to endorse and collect checks in settlement of any refund, and to delegate authority.

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To sell, bargain and convey any and all personal property which I may own, including any automobiles, on such prices and terms as my said Attorney, in their discretion, shall deem best, and to sign on my behalf all certificates of title and any and all other transfer documents, whether required by a state bureau or division of motor vehicles or any other party.

To make application for, accept, endorse and negotiate any and all Medicaid, Medicare, Social Security, private pension, and retirement benefits, and to apply them for my benefit, maintenance and support.

To exercise any and all incidents of ownership or control over every health, accident, life or endowment insurance policy, which I own or control, including, but not by way of limitation, the right to borrow upon, modify or surrender the same for cash value or otherwise, the right to exercise any and all rights, options and privileges in connection therewith, the right to collect and receive disability income, annuity payments, dividends and other distributions therefrom, provided, however, that such power with respect to life insurance shall not be exercisable by my Attorney in fact as to any policy on his or her own life, and shall be exercisable as to any policy on my life only in such a way as will not materially distort my estate planning arrangements; Have access to any safe deposit box of which I am the owner and to have the right to remove therefrom any of the contents of such safe deposit box and even though I do not herein identify such safe deposit box by number or location.

Giving and granting to my said Attorney full power and authority to do and perform all and every act and thing whatsoever, requisite, necessary and proper to be done in and about the premises, as fully, to all intents and purposes, as I might or could do, if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said Attorney shall lawfully do, or cause to be done, by virtue hereof.

[REMAINDER OF THIS PAGE INTENTIONALLY BLANK]

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This Power of Attorney shall not be affected by disability of the undersigned Principal or by lapse of time.

A photostatic copy of this Power of Attorney, as executed, given by me or my attorneys to any third party shall be conclusive to such third party as to the authority of my Attorney to act for me as provided herein.

X: Dollie White
Signature of the Principal,
Dollie O White

WITNESSES

On February 12, 20 21, before us, the undersigned attesting witnesses, appeared the Principal, Dollie O White, who signed, published and acknowledged, in our presence, sight and hearing, this instrument to be the Principal's Power of Attorney.

Signature of First Witness:

Signature of Second Witness:

Micha White

Edward White

Printed Name of First Witness:

Printed Name of Second Witness:

Micha White

Edward White

Residence Address of First Witness:

Residence Address of Second Witness:

645 Enterprise RD
Chicago Heights, IL 60411

645 Enterprise rd
Chicago Heights, IL 60411

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ACKNOWLEDGEMENT

STATE OF: Illinois



COUNTY OF: Cook

Before me, a Notary Public in and for said County/State, personally appeared

Dollie O White

known to me (or satisfactorily proven) to be the person(s) whose names(s) is/are subscribed to this instrument, who acknowledged that she/he/they did sign the foregoing instrument and that the same is her/his/their free act and deed.

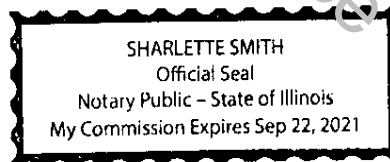
In Testimony Whereof I have hereunto set my hand and official seal, at

2440 Lincoln Hwy Olympia Field IL 60461

this 12 day of February, 2021.

Notary Public

My commission expires on: 9-22-2021



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ACKNOWLEDGMENT EXECUTED BY AGENT

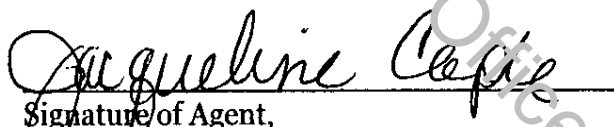
for

Jacqueline Caple

I have read the attached Power of Attorney and I am the person identified as the agent ("Attorney-in-Fact") for the Principal.

I hereby acknowledge that in the absence of a specific provision to the contrary in the Power of Attorney, or under the laws of the State where the Principal resides, when I act as agent:

- I shall exercise the powers for the benefit of the Principal.
- I shall keep the assets of the Principal separate from my assets.
- I shall exercise reasonable caution and prudence.
- I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the Principal.



Signature of Agent,
Jacqueline Caple

Date: 2/2/21

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ACKNOWLEDGMENT EXECUTED BY AGENT

for

I have read the attached Power of Attorney and I am the person identified as the agent ("Attorney-in-Fact") for the Principal.

I hereby acknowledge that in the absence of a specific provision to the contrary in the Power of Attorney, or under the laws of the State where the Principal resides, when I act as agent:

- I shall exercise the powers for the benefit of the Principal.
- I shall keep the assets of the Principal separate from my assets.
- I shall exercise reasonable caution and prudence.
- I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the Principal.

Julgueline Caple

 Signature of Agent,

Date: *2/12/21*

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STANDARD LEGAL™

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ILLINOIS POWER OF ATTORNEY FOR PROPERTY

The State of Illinois has a statutory short form Power of Attorney – meaning that the legislature has created a template that can be used to create a power of attorney. Per the Illinois law, the short form power of attorney is not meant to be exclusive and other forms of power of attorney may be used. As such, Illinois residents can use the form below or any of the Power of Attorney forms created by Standard Legal.

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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 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 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 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.

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 this Notice:

X J. D. Miller
Principal's initials

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, Dollie White, hereby revoke all prior powers of attorney for property executed by me and appoint Jacqueline Caple 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:

- (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.
- (l) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property transactions.

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:

N/A

3. In addition to the powers granted above, I grant my agent the following powers:

N/A

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)

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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.

Witness Signature: Micah White

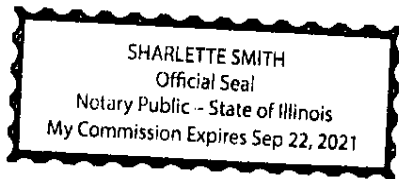
Witness Printed Name: Micah White

Dated: 2/12/21

State of ILLINOIS)
County of COOK) SS:

The undersigned, a notary public in and for the above county and state, certifies that Dollie White, 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 witness Micah White 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: 2/12/2021



Sharlette Smith
Notary Public

My commission expires: 9-22-2021

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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. This power of attorney shall become effective on 2/12/21.

7. This power of attorney shall terminate on N/A.


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: Ernie White.

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 a person with a disability 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.

Principal Signature: 

Printed Name of Principal: Dollie White

Dated: 2/12/21

WITNESS STATEMENT

The undersigned witness certifies that Dollie White, 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

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Exhibit A

ALL THE FOLLOWING DESCRIBED REAL ESTATE SITUATED IN THE COUNTY OF COOK IN THE STATE OF ILLINOIS, TO WIT:

LOT FIFTEEN (15) IN BLOCK SIX (6) IN SARATOGA FARMS, A SUBDIVISION OF THE NORTHEAST QUARTER OF THE SOUTHWEST QUARTER AND PART OF THE SOUTHEAST QUARTER OF THE SOUTHWEST QUARTER OF SECTION EIGHTEEN (18), TOWNSHIP THIRTY-FIVE (35) NORTH, RANGE FOURTEEN (14), EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT RECORDED APRIL 19, 1956 AS DOCUMENT NO. 16555442, ALL IN COOK COUNTY, ILLINOIS.

Being the same property conveyed to Eugene White and Dollie O. White, his wife not in tenancy in common, but in joint tenancy, Eugene White having passed from this life on June 3, 2007, from Elayne Snyder by Warranty Deed dated January 2, 1973 and recorded January 3, 1973 among the Land Records of Cook County, State of Illinois in Instrument No. 22174356.

Tax Account #: 32-18-312-015-0000

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