Doc#. 2206106199 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

21-320-055-1001

Date: 03/02/2022 12:00 PM Pg: 1 of 7

MAIL TO:

Fort Dearborn Land Title

111 W. Washington Street
Suite 1421
Chicago, fl. 69602

Permanent Parcel Number:

RECORDING COVER PAGE

Property Address:	2424 N. Southport Aire
	40

Prepared by:

Name

Thomas J. Scannell

Address

City, State & Zip Code

Thomas J. Scannell

Onicago JL 10643

^{*}Please note – This cover page has been attached to the document for recording purpose. It is a permanent part of the document and has been included in the page count.

POWER OF ATTORNEY

Prepared by:

Thomas J. Scannell Scannell & Associates P.C. 9901 S. Western, Suite 100 Chicago, IL 60643

Mail To:

"NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY"

PLEASE READ THIS NOTICE CARFFULLY. 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 piedge, sell, or dispose of any of your real or personal property, even without your consent or any advance rotice to you. When using the Statutory Short Form, you may name successor agents, but you may not name of agents.

This form does not impose a duty upon your agent to hardle 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 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 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:

Principal's initials

1 of 5

10-22-010/ 2563

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, Erin Foley, hereby appoint: Terence Naughton (NOTE: You may not name co-agents using this form.) 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:

(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 strike out a category you must draw a line through the title of that category.)

- (a) Real estate ran sactions.
- (b) Financial institution transactions.
- (m) Borrowing transactions.
- (o) All other property 'car sactions.

(NOTE: Limitations on and adultions to the agent's powers may be included in this power of attorney if they are specifically described below.)

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

(NOTE: Here you may include any specific limitations you deem appropriate, such as a prohibition or conditions on the sale of particular stock or real estate or special rules on borrowing by the agent.)

3. In addition to the powers granted above, I grant my age, the following powers:
(NOTE: Here you may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint te tarks or revoke or amend any trust specifically referred to below.)

The Power of Attorney herein is specifically granted the authority to execute any and all documents which may be necessary to purchase real property commonly known as 2424 N. Southport, Unit A, Chicago, IL 60614 including, but not limited to execution of notes, mortgages, RESPA and the like and to receive for and accept on my behalf all proceeds therefrom.

(NOTE: Your agent will have authority to employ other persons as necessary to enable the agent to properly exercise the powers granted in this form, but your agent will have to make all discretionary decisions. If you want to give your agent the right to delegate discretionary decision-making powers to others, you should keep paragraph 4, otherwise it should be struck out.)

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 niety 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.

(NOTE: Your agent will be entitled to reimbursement for all reasonable expenses incurred in acting under this power of attorney. Strike out paragraph 5 if you do not want your agent to also be entitled to reasonable compensation for services as agent.)

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(NOTE: This power of attorney may be amended or revoked by you at any time and in any manner. Absent amendment or revocation, the authority granted in this power of attorney will become effective at the time this power is signed and will continue until your death, unless a limitation on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.)

6. (X) This power of attorney shall become effective on the date this instrument is signed.

(NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability or a written determination by your physician that you are incapacitated, when you want this power to first take effect.)

7. (X) This power of attorney shall terminate on March 21, 2022.

(NOTE: Insert a future date or event, such as a court determination that you are not under a legal disability or a written determination by your physician that you are not incapacitated, if you want this power to terminate prior to your death.)

(NOTE: If you wish to name one or more successor agents, insert the name and address of each successor agent in paragraph 8.)

8. If any agent named by me the il 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: Thomas J. Scannell

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 he person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

(NOTE: If you wish to, you may name your agent as guard'an 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 on prograph 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 introduction 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-av or otherwise to engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney who is authorized to practice law the indicate of law unless he or she is a licensed attorney at law the indicate of law unless he or she is a licensed attorney at law the indicate of law unless he is a licensed at law the indicate of law unless he is a licensed at law the indicate of law unless he is a licensed at law the indicate of law unless he is a licensed at law the indicate of law unless he is a licensed at law the indicate of law the indi

11. The Notice to Agent is incorporated by reference and included as part of this form.

Dated

Signed 77

(NOTE: This power of attorner 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.)

(NOTE: You may, but are not required to, request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this power of attorney, you must complete the certification opposite the signatures of the agents.)

agent (and successors) are correct.	
(agent)	(principal)
(successor agent)	(principal)
(successor ager.c,	(principal)

Specimen signatures of agent and successors. I certify that the signatures of my agent (and successors)

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 conducted for the principal;
- (4) attempt to preserve the principal's estate preserving the plan is consistent with the principal's best interest; and
- (5) cooperate with a person who has authority to n ake 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 inconsister a vith 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;
- (5) continue acting on behalf of the principal if you learn of any event that teach attes this power of attorney or your authority under this power of attorney, such as the death of the principal, your leval 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 writin, 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 Attorn y 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."

(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.)

The undersigned witness certifies that Erin Foley, 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 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.

(NOTE: Illinois require couly 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 Erin Foley, 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 aner in 3 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, whing, descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or success. Seent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; or (c) an agent or successor agent under the foregoing power of attorney. My Cla,

State of Illinois County of Cook

The undersigned, a notary public in and for the above county and state, certifies that Erin Folgy known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, an exred before me and sang with Carter Rose the witness(es)_ _(and _ Petraspa

in person and acknowledged signing and delivering the instrument as the free and voluntary act of the rankinal, for the uses and purposes therein set forth (, and certified to the correctness of the signature(s) of the agent(s)).

Notary Public

My commission expires

ANNA MITCHELL OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires April 27, 2025

2206106199 Page: 7 of 7

UNOFFICIAL COPY

EXHIBIT "A"

Parcel 1:

Unit Number A in the 2424 North Southport Condominium as delineated on a survey of the following described real estate: Lot 14 and the North 1/2 of Lot 15 in Block 1 in William Hahnes Subdivision of the Southeast 1/4 of the Southwest 1/4 of Section 29, Township 40 North, Range 14, East of the Third Principal Meridian, which survey is attached as Exhibit "A" to the Declaration of Condominium recorded as Document Number 0727615155; together with its undivided percentage interest in the common elements, all in Cook County, Illinois.

Jel 2:
3 (exclusive) ny
30 (ex The (exclusive) right to the use of (P-3), a limited common element as delineated on the survey attached to the