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Karen A. Yarbrough Cook County Clerk

Date: 09/09/2022 10:22 AM Pg: 1 of 7

PREPARED BY: McElroy Law Offices LLC 129 Commercial Drive Suite 17 Yorkville IL 60560

AFTER RECORDING RETURN TO:

Homelight Title LLC 200 S Wack ( Dr., #625 Chicago, IL 60606

Property Address: 16101 Haven Avenue Orland Hills IL 60487

PIN Numbers: 27-22-207-061-0000

11-22-9126 293

(For Recorder's Use Only)

# Or Coop C ILLINOIS STATUTORY POWER OF ATTORNEY

by and among

Elizabeth Hannigan (Principal)

and

Christopher J Brown (Agent)

C/o/t/s Office Dated: As of August 19, 2022

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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. The "NOTF" paragraphs throughout this form are instructions.

You are not required to sign this Power of Attorney, but it will not take e fect 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

## UNDESTATUTORY SHORT FORM LIMITED POWER OF ATTORNEY FOR PURCHASE OF REAL ESTATE ONLY

1. I, ELIZABETH HANNIGAN, of 352 Brittany Ct, Apt. C, Geneva, IL 60134, Principal, hereby appoint: CHRISTOPHER J. BROWN, of 352 Brittany Ct, Apt. C, Geneva, IL 60134, 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 Sale of Real Estate, described more fully below, and grant him 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:

Real Estate Transactions, Financial Institution Transactions, Forrowing Transactions, and all Other Property Transactions ONLY

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

POWERS GRANTED HEREIN SHALL BE LIMITED TO THE PURCHASE OF REAL ESTATE LOCATED AT 16101 Haven Avenue, Orland Hills, IL 60487 FROM Jamie L. Ricks, or his assignee(s), FOR THE SUM OF Two Hundred And Sixty-Five Thousand Dollars And 00/100 (\$265,000.0.), SPECIFICALLY INCLUDING THE AUTHORITY TO EXECUTE THE MASTER SETTLEMENT STATEMENT AND RELATED CLOSING LOAN/ MORTGAGE DOCUMENCS AND TO COMMUNICATE WITH THE UNDERSIGNED'S MORTGAGE LENDER(S).

3. In addition to the powers granted above, I grant my agent the following powers: To sign any and all documents necessary to close the real estate transaction for the property known as 16101 Haven Avenue, Orland Hills, IL 60487, including Title Company Documents, Lender Documents, Closing Documents, Letters of Direction, and any 'last minute' agreements necessary to close the transaction. Any dispute regarding my agent's power shall be resolved in favor of my agent."

(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 may 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. This power of attorney shall BECOME EFFECTIVE UPON THE DATE OF EXECUTION.
- 7. This power of attorney shall TERMINATE NINETY (90) DAYS AFTER THE FINAL CLOSING OF THE REAL ESTATE TRANSACTION REFERRED TO IN PARAGRAPH 2, ABOVE.

(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 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; NONE.

For purposes of paragraph 8, a rerson 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.

(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 peragraph 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 is a lattorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed character 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: <u>AUQUST</u> 19, 2022

Signed:

Elizabeth Hannigan, Principal

(NOTE: This power of attorney 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.)

The undersigned witness certifies that ELIZABETH HANNIGAN, known to me to be the same person whose name is subscribed as Principal to the foregoing Power of Attorney, appeared before

attending physician or mental health service provider of an owner, operator, or relative of an owner or oper principal is a patient or resident; (c) a parent, sibling, sibling, or descendant of either the principal or any as power of attorney, whether such relationship is by bloc successor agent under the foregoing power of attorney  Dated:    Dated:	ator of a health care facility in which the descendant, or any spouse of such parent, gent or successor agent under the foregoing od, marriage, or adoption; or (d) an agent or
The undersigned, a notary public in and for the above county and state, certifies that ELIZABETH HANNIGAN, 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, 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.  Dated:  OFFICIAL SEAL TREASURE LINDSAY	
My commission expires: 4-15-26 ** tarry P	MOTARY PUBLIC, STATE OF ILLII MY COMMISSION EXPIRES APR. 15,
(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.)	
Specimen signatures of agent	I certify that the signatures of my agent me genuine.
(agent)	(principal)
(NOTE: The name address and phone number of the	navana nyanaviva this farm or who assisted

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

(NOTE: The name, address, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)

Jeffery L. McElroy, Attorney at Law, McElroy Law Office LLC

129 Commercial Drive, Suite 17

P. O. Box 774

Yorkville, IL 60560

### UNOFFICIAL COPY

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 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 fund; 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 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 Illing 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 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."

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#### **SHORT FORM**

#### POWER OF ATTORNEY FOR PROPERTY

#### LEGAL DESCRIPTION:

Lot 3 in Block 5 in Westhaven North Resubdivision, a Resubdivision of Lots 32, 33, 34, 35 and 36 in Block 5 of Westhaven North, a Subdivision in the East 1/2 of the Northeast 1/4 and in the South 1/2 of the West 1/2 of the Northeast 1/4 of Section 22, Township 36 North, Range 12 East of the Third Principal Meridian, in Cook County, Illinois

Pennent Index Number: 27-22-207-061-0000

Property Address: 16101 Haven Avenue, Orland Hills, IL 60487

#### INSTRUMENT PREFARED BY AND AFTER RECORDATION MAIL TO

Oct County Clark's Office Jeffery L. McElroy, Attorney at Law McElroy Law Office LLC 129 Commercial Drive, Suite 17 P. Q. Box 774 Yorkville, IL 60560

Telephone: (630) 385-8547