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Karen A. Yarbrough Cook County Clerk

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RECORDING COVER PAGE POWER OF ATTORNEY FILE 22154262 1/2

Property of Cook County Clerk's Office

Prepared by and mail to:

Trisha Chokshi, Esq.

Chokshi Filippone Law LLC, A policy issuing agent for Old Republic Title 401 E. Prospect Avenue, Suite 211 Mount Prospect, IL 60056

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 linancial 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 Statutery Short Form, you may name successor agents, but you may not name coagents.

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 give it in 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 expear in court for you as an attorney-at-law or otherwise to engage in the practice of law uras s 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 "NOTE" paragrap's troughout 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:

SAS (SAS)

Illinois Statutory Short Form Power of Attorney for Property

1. I, SHIRLEY A SCHNEIDER, 800 RIDGE ROAD UNIT 109, WILMETTE, Illinois, hereby revoke all prior powers of attorney for property executed by me and appoint (NOTE: You may not name co-agents using this form):

Name:

PATRICIA LEIGH THOENNES

Address:

511 QUIGLEY, MUNDELEIN, IL 60060

Telephone:

(847) 363-4816

as my attory y-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with espect 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 of more of the following categories of powers you do not want your agent to have. Failure to strike the table 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 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.

),,;;;;c

- (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 powers and transactions.

(NOTE: Limitations on and additions 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 ste	ock or rea	al estate or s	pecial rules	on borrowir	ig by the	agent)	

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

(NOTE: Here you may and any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below)

Authority to Fund Trust. My agent is authorized to transfer, and convey any property or interest in property which I may own to a trust if then in existence, or to any other trust of which I am a beneficiary and under the terms of which I expressly have the power, exercisable alone or with others, to amend or revoke such trust, whether such trust was created before or after the execution of this power of attorney.

Authority to Engage in Financial Transactions. My agent is authorized to engage in financial transactions as agent with himself/herself in his/her individual capacity and I waive on behalf of myself and my estate all objections to any such transactions. I waive any conflict which may exist or which I have because my agent (who is a fiduciary when acting pursuant to the authority granted by this instrument) also is a beneficiary of my estate and/or otherwise derives some current or future benefit from such financial transactions.

Authority to Renounce and Disclaim. My agent is authorized to renounce and disclaim any property or interest in property or powers to which for any reason and by any means I may become entitled, whether by gift or by testate or intestate succession; my agent is further authorized to release or abandon any property or interest in property or powers which I may now have or hereafter acquire and, in exercising such discretion, my agent may consider, without limitation, such matters as

- the effect of such renunciation or disclaimer upon my estate's liability for estate, inheritance or other death taxes;
- the effect of such renunciation or disclaimer upon persons interested in my estate; and
- the effect of such renunciation or disclaimer upon persons who would receive the renounced or disclaimed property.

Authority to Renounce and Disclaim. My agent is authorized to renounce and disclaim any property or interest in property or powers to which for any reason and by any means I may become entitled, whether by gift or by testate or intestate succession; my agent is further authorized to release or abandon any property or interest in property or powers which I may now have or hereafter acquire and, in exercising such discretion, my agent may consider, without limitation, such matters as

- the effect of such renunciation or disclaimer upon my estate's liability for estate, inheritance or other death taxes;
- the effect of such renunciation or disclaimer upon persons interested in my estate; and
- the effect of such renunciation or disclaimer upon persons who would receive the renounced or disclaimed property.

Authority to Compensate Third Party Agents. My agent is authorized to compensate separately any brokers, attorneys, auditors, depositories, real estate managers investment advisors and other persons reasonably necessary for my agent under this Power of Attorney to exercise his or her powers.

Authority to Change Accordes. My agent is authorized to change any of my accounts, joint or otherwise, by renaming such accounts, removing my name from such accounts or otherwise dealing with any savings, checking or other banking or securities accounts with any financial institution or brokerage firm, whether said accounts are in my name alone or in joint tenancy with any other person.

Trusts. I authorize my agent to create, fund, ar end, modify, or terminate revocable or irrevocable inter vivos trusts; accept trusfers or distributions from any trustee of any trust; and add property coan existing or subsequently created trust.

Estate Transactions. My agent is authorized to engage in estate transactions, including Receipt, Release and Refunding Agreements and Waivers and Consents.

Authority to establish, contribute to, roll over, or change beneficiary of retirement plan. My agent is authorized to create or to contribute to a Roth IRA, Traditional IRA or Nondeductible IRA or any available employee benefit plan on my behalf or, when appropriate, to create or contribute to a plan for a self-employed individual; to select any payment distribution or option under any individual retirement account or employee benefit plan in which I am a participant (including plans for self-employed individuals) or to change options I have selected, so long as such decisions do not result in a change of beneficiary; to make ongoing compulsory or voluntary contributions to such plan; to make "rollovers" of selected plan benefits into other retirement plans; and to make any and all available elections or beneficiary designations on my behalf.

My agent is authorized to roll over IRA or qualified plan amounts to an IRA or Roth IRA in my name. Furthermore, my Agent shall have the authority to execute a beneficiary designation form naming beneficiaries (individuals or trusts) as consistent with the dispositive bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent may change the names of beneficiaries of any IRA or qualified plan if a previously-named beneficiary is deceased. My agent shall only make changes that are consistent with my bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent may not name himself/herself, his/her estate, or the creditors of either as such new or alternate beneficiary, except to the extent this is consistent with my be usest plan.

My Agent shall have the authority to make any gift, income, estate, or excise election with regard to my qualified plans, IRAs or Roth IRAs including, but not limited to, elections under Sections 401, 402, 408, 408A and 4980A of the Internal Revenue Code of 1986.

My agent shall also have the authority to revoke or modify a TEFRA Section 242(b) electior.

Authority to Elect Roth Conversion. My Agent is authorized to convert all or any portion of my qualified plan and/or IRA to a Roth IRA, as defined in IRC Section 408A.

My Agent shall have the authority to execute a beneficiary designation form naming beneficiaries (individuals or trusts) as consistent with the dispositive bequest plan as set forth in any will or revocable trust executed by me and then in effect. My Agent 100y change the names of beneficiaries of any IRA or qualified plan if a previously named beneficiary is deceased. My Agent shall only nake changes that are consistent with my bequest plan as set forth in any will n revocable trust executed by me and then in effect. My Agent may not name himself/herself, his/her estate, or the creditors of either as such new or alternate beneficiary, except to the extent this is consistent with my bequest plan.

Beneficiary Designations. I authorize my agent to select or change the ownership or beneficiary designations on any and all of my accounts, insurance policies, any qualified or non-qualified plans and/or annuities. My agent shall only make changes that are consistent with my bequest plan as set forth in any will or revocable trust executed by me and then in effect.

Statutory Elections. My agent is authorized to make statutory elections and renounce or disclaim any interest in property by testate or intestate succession or by inter vivos transfer consistent with the laws of the State of Illinois.

Exercise of Power of Appointment. I authorize my agent to exercise in whole or in part, or decline to exercise, my rights under any special or general powers of appointment or any rights retained by me in trusts or otherwise, whether or not any such trusts or other instruments were created by me or others.

Safe Deposit Box. My agent is authorized to enter any safe deposit box or other place of safekeeping standing in my name alone or jointly with another and to remove the contents and to make additions.

Enforcement Proceedings. I authorize my agent to commence enforcement proceedings, at my expense, against any bank, savings and losa association, credit union, financial institution, brokerage firm, stock transfer agent, insurance company, title insurance company, or other person or entity that fails or refuses to honor this durable power of attorney.

Estate and Long Term Care Planning. My agent is authorized:

- 1. To sagge in estate and long term care planning in furtherance of achieving asset preservation based on all relevant factors, including:
 - a. The value and nature of my property;
 - b. My foresecute obligations and need for maintenance;
 - c. Minimization of taxes, including income, estate, inheritance, generation skipping transfer, and gift taxes;
 - d. Eligibility for a benefit, a program, or assistance under a statute or government regulation.

Property transfers made pursuant to the authority granted herein shall, for all purposes, be deemed to have been "in my best interest" if: (1) made in accordance with the provisions of this section; and (2) made in the context of estate planning, financial planning, Medicaid planning, long term care planning and/or asset preservation planning pursuant to he recommendations of an attorney-at-law experienced in such matters.

- 2. My agent shall take any action necessary to effectuate the foregoing, including qualifying me for Social Security Benefits, Supplemental Security Income, Veterans Benefits, Medicaid or any other government benefit program. Such actions may include but shall not be limited to the following:
 - a. Convert non-exempt resources into exempt resources;
 - b. Divest me of assets:
 - c. Sign an Assignment of Support;
 - d. Sign an application for Medical Assistance or any other government benefit program;

- e. Serve as representative payee;
- f. Make home improvements and additions to my family residence;
- g. Pay off, partly or in full, any encumbrance on my family residence;
- h. Purchase a family residence, if I do not own a family residence;
 - i. Purchase a more expensive family residence;
- j. Transfer the family residence to a spouse who does not need long-term health or nursing care;
 - k. Attend and represent me at Fair Hearings.

Domicile. My agent is authorized to change or maintain the domicile and/or residency of the principal for any and all purposes and to take any and all action to effectuate the foregoing.

Nomination of Coardian. I intend hereby to render unnecessary any future proceeding for a court appointed guardian or conservator for me and/or my property in incorporated. Accordingly, I request in the strongest possible terms that any court which may receive or act upon a petition for the appointment of a guardian or concervator of my estate should deny such petition so long as my agent is acting under this Power of Attorney. I direct that if a guardian or conservator of my person and/or property is ever appointed for me in spite of this request that my agent be named as my guardian or conservator. If my agent is unable or unwilling to serve as my guardian or conservator, I nominate the successor agent named in this instrument as my guardian or conservator.

Reimbursement of Health Care Agent. Reimburse my rgent under any health care directive, including but not limited to a Durable Power of Attorney for Health Care, even if such health care agent is my gent for any costs (including legal fees) reasonably incurred in or as a result of acting pursuant to such Durable Power of Attorney for Health Care.

Appointment of a Special or Ancillary Agent. My agent may appoint, in writing, a corporate fiduciary or an individual to serve as Special Agent to exercise any power under this power of attorney. My agent may revoke any such appointment at will.

If my agent determines that it is necessary or desirable to appoint an Ancillary Agent to act under this power of attorney in a jurisdiction other than this one, my agent may do so. In making an appointment, my agent may sign, execute, deliver, acknowledge and make declarations in any documents that may be necessary, desirable, convenient or proper in order to carry out the appointment.

A Special or Ancillary Agent may exercise all powers granted by this power of attorney unless expressly limited elsewhere in this power of attorney or by the instrument appointing the Special or Ancillary Agent. A Special or Ancillary Agent may resign at any time by delivering written notice of resignation to my agent. Notice of resignation shall be effective in accordance with the terms of the notice.

Authority to Purchase Health Insurance. My agent is authorized to apply for and to purchase health insurance for me and on my behalf.

insurance Transactions. I authorize my agent to engage in insurance transactions, including applying for, maintaining, canceling, paying promiums on, increasing or decreasing, coverage, collecting, borrowing from, transferring ownership, surrendering and/or purchasing insurance policies

Annuities. My agent is authorized to withdraw from, transfer ownership, surrender and/or purchase any commercial annuity, private annuity or grantor retained annuity trust.

Government Agencies and Benefits. My agent has the unrestricted power to deal with and obtain maximum entitlements and benefits relating to the Social Security Administration, Veterans Administration, Social Services Departments, Social Security Disability Insurance, Supplemental Security Income, Medicaid, Medicare, Worker's Compensation and all other government benefits or entitlements programs, including claims, planning for eligibility, submission of applications and appeals. In this regard, my agent is authorized to execute and deliver any power of attorney or authorization to act form requested or required by a governmental agency. This power shall impose no affirmative duty on my agent to provide information and/or documentation to any government agency.

Authority to Establish Special Needs Trust. My agent is authorized to establish a Supplemental Needs Trust, an OBRA Trust ((d)(4)(A) Trust) or a Pooled Payback Trust ((d)(4)(C) Trust) for my benefit.

Authority with regard to Inter Vivos Trusts. My Agent may create, fund, amend, modify, or terminate revocable or irrevocable inter vivos trusts; accept transfers or distributions from any trustee of any trust; and add property to an existing or subsequently created trust.

Specifically, my Agent may create and fund a qualified income trust under United States Code, Title 42, Section 1396p(d)(4)(B) if such a trust should be deemed necessary to qualify me for Medicaid benefits and to make arrangements for the diversion of my income to such a trust as necessary to comply with applicable Medicaid rules and regulations.

Intent to Return Home. I hereby express my intention to remain in my home if at all possible, regardless of my physical, emotional or mental

condition; If I should be in a hospital, rehabilitation center or nursing home, I hereby express my intention to return home, and my agent shall take all steps including, but not limited to, executing any document, affidavit or Declaration of Intent to Stay/Return Home on my behalf, to effectuate the same.

Caregiver Agreements. I authorize my agent to enter into, execute, modify, alter or amend any contract or agreement (for example, a Caregiver Agreement or Personal Services Contract) pertaining to my medical, personal or general care that I may require at my residence, assisted living facility, nursing facility, or in another's residence on my behalf. I expressly authorize my agent to serve as a caregiver under any such egreement and to be paid in accordance with the terms and conditions of such agreement, provided, however, that such services are compensated at fair marker value.

Authority to Apply for Reverse Mortgage. My agent is authorized to apply for a reverse mortgage, including but not limited to signing the Mortgage and Note.

Real Estate Transactions. Fixtures and Personalty. I authorize my agent to engage in real estate transactions or transactions which involve any proprietary lease or stock evidencing my ownership of a cooperative apartment, including all fixtures at datticles of personal property used in connection with the real property (my agent may include such property in the deeds, mortgages, agreements, and any other instruments to be executed and delivered in connection with real estate transactions and which may be described in said instruments with more particularity).

Business Activities. I authorize my agent to in est in, contribute to, establish, create, and fund any existing or newly created partnership, corporation, limited liability company, limited liability partnership, limited partnership, or other entity and to exercise all rights pertaining thereto.

Business Succession Agreements. My agent is authorized to enter thato buy/sell agreements and any other business succession agreements.

Loans and Notes. My agent is authorized to conduct all dealings in respect to loans and forgiveness of debts; borrow money on such terms as my agent may decide in his/her sole discretion, on a secured or unsecured basis, and to execute all notes, mortgages and other instruments relating to such, provided such loan carries a fair market interest rate.

Authorization to Deal With Tax Authorities. My agent is authorized:

• To deal with tax authorities, to execute and sign on my behalf any and all Federal, state, local and foreign income and gift tax returns (as authorized under Section 1.6012-1(a)(5) of Title 26 of the Code of Federal Regulations or under any state, local, or foreign authority), including estimated returns and interest, dividends,

gains and transfers, and to pay any taxes, penalties and interest due thereon;

- To represent me or to sign an Internal Revenue Service Form 2848
 (Power of Attorney or Declaration of Representative) or Form 8821 (Tax Information Authorization), or comparable authorization, appointing a qualified lawyer, certified public accountant or enrolled agent (including my agent if so qualified) to represent me before any office of the Internal Revenue Service, state, local or foreign taxing authority with respect to the types of taxes and years referred to above, and to specify on said authorization said types of taxes and years;
- To receive from or inspect confidential information in any office of the Internal Revenue Service, state, local or foreign tax authority;
- To receive and deposit, in any one of my bank accounts, or those
 of any revocable trust of mine, checks in payment of any refund of
 Federal, state local or foreign taxes, penalties and interest;
- To execute wrive s (and offers of waivers) of restrictions on assessment or collection of deficiencies in taxes and waivers of notice of disallowance of a claim for credit or refund;
- To execute consents extending the statutory period for assessment or collection of such taxes; to execute Offers in Compromise and Closing Agreements under Section 7121 or comparable provisions of the Internal Revenue Code, as amended, or any federal, state, local or foreign tax statutes or regulations:
- To delegate authority or to substitute another representative for any one of those previously appointed by me or my Agent; to sign tax returns and tax powers of attorney; and to receive copies of all notices and other written communications involving my federal, state, local or foreign taxes at such address as my agent may designate.

Employment of Professionals. Retain, discharge and pay, in the scie discretion of my agent, for the services of attorneys, accountants, financial planners, geriatric care managers, social workers and any other health care professionals. My agent is not obligated to retain or pay for any health care professional on behalf of the principal.

Marital Agreements and Designation of Spouse as agent. I authorize my agent to enter into, modify or amend any pre-nuptial or post-nuptial agreement to which I am or hereafter become a party. If a named agent is my spouse, then this power of attorney as to that named agent is automatically revoked, and that agent is deemed to have resigned as agent upon the filing of any separation or dissolution action between us.

Credit Cards. I authorize my agent to use any credit card in my name; to make purchases on my behalf; to open a new credit card account and to close any existing credit card.

Domestic Pets. I authorize my agent to make reasonable expenditures for the care, maintenance, support and general welfare of any domestic pet I may own. I authorize any and all payments from my funds for pet care provided by any person or entity, including my agent.

Companionship. I authorize my agent to provide for such companionship for me, in the sole discretion of my agent, as will meet my needs and preferences at a time when I am disabled or otherwise unable to arrange for such companionship myself.

Spiritual and Religious Needs. My agent is authorized to arrange for the involvement of religious clergy or spiritual leaders in my care, provide said persons a coss to me at all times, arrange or maintain my membership in religious or spiritual organizations, and create opportunities for me to derive comfort and spiritual satisfaction from such activities, including the purchase of religious books, tapes and other materials.

U.S. Mail. I authorize my agent to open, read, respond to and redirect my mail; to represent me before the U.S. Postal Service in all matters relating to mail service.

Duty to Account. My agent shall render statements of account of receipts, disbursements, principal on hand, and transactions conducted on my behalf if 1) ordered by a court; 2) requested by me, a guardian, conservator, trustee or other fiduciary acting on roy behalf; 3) requested by anyone who is a legatee or beneficiary of my will o trust; or 4) following my death, if requested by the executor or personal representative of my estate. If so requested, my agent shall comply with the request within 30 days or provide a writing or other record substantiating vary additional time is needed and shall comply with the request within an additional 14 days.

(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 disc etionary 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.

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 immediately.

(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 of ct.

7. This power of attorney shall terminate on my revocation of this power of attorney or upon my death, whichever shall first occur.

(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.)

(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 name it is 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:

Name:

ELIZABETH ANN COURTNEY - DEPEW

Address:

834 MOUNT REUBEN KOAD, (PO BOX 921, mailing)

GLENDALE, OREGON 974.42

Telephone:

(541) 908-5539

Name:

DONNA RAE MORGAN

Address:

938 STONE SPRING DRIVE, EUREKA MO 63025

Telephone:

(425) 246-9610

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 the person is unable to give prompt and intelligent consideration to business reatters, 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 uif, 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 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 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.)

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

Dated: September 19, 2019

Signed

SHIRLEY A SCHNEIDER

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.)

STATE OF ILLINOIS

COUNTY OF COOK

The undersigned, a notary public in aid for the above county and state, certifies that SHIRLEY A SCHNEIDER, known to me to be the same person whose name is subscribed to the foregoing document, appeared before me in person and acknowledged signing and delivering the instrument as her free and voluntary act, for the uses and purposes therein set forth.

Dated: September 19, 2019

Leahine Friedman, Notary Public

OFFICIAL SEAL
JEANINE FRIEDMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:06/05/21

The undersigned witness certifies that SHIRLEY A SCHNEIDER, 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.

Dated: September 19, 2019

Hamie Christo

Witness Name

800 Ridge Rd

Witness Street Address

W. I.mette, III 60091

Witness City and State

Witness Name

Witness Street Address

Witness City and State

UNOFFICIAL

(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 (and successors)

I certify the signatures of my agent (and successors) are genuine.

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

Green

Bay

Road,

Jeanine Friedn an

1001 Suite 183

Winnetka, IL 60093

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;
- attempt to preserve the principal's estate plan, to the extent actually known by the agent, it ries riving 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 reads with your funds;
 - 4. borrow funds or other property iron 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 Illinois 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."

<u>Section 3-4 of the Illinois Statutory Short Form</u> <u>Power of Attorney for Property Law</u>

Section 3/4. Explanation of powers granted in the statutory short form power of attorney for property. This Section defines each category of powers listed in the statutory short form power of attorney for property and the effect of granting powers to an agent. When the title of any of the following categories is retained (not struck out) in a statutory property power form, the effect will be to grant the agent all of the principal's rights, powers and discretions with respect to the types of property and transactions covered by the retained category, subject to any limitations on the granted powers that appear on the form. The agent will have authority to exercise each granted power for and in the name of the principal with respect to all of the principal's interests in every type of property or transaction covered by the granted power at the time of exercise, whether the principal's interest are direct or indirect, whole or fractional, legal, equitable or contractual, as a joint tenant or tenant in common or held in any other form; but the agent will not have power under any of the s'activ'ry categories (a) through (o) to make gifts of the principal's property, to exercise powers to appoint to others or to change any beneficiary whom the principal has designated to take the principal's interests at death under any will, trust, joint ter are y, beneficiary form or contractual arrangement. The agent will be under no duty to exercise granted powers or to assume control of or responsibility for the principal's property or affairs; but when granted powers are exercised, the agent y ill be required to use due care to act in good faith for the benefit of the principal using due care, competence, and dilignice in accordance with the terms of the statutory property power and will be liable for negligent exercise. The agent may act in person or through others reasonably employed by the agent for that purpose and will have authority to sign and delive all instruments, negotiate and enter into all agreements and do all other acts reasonably necessary to implement the exercise of the powers granted to the agent.

- (which term includes, without limitation real estate subject to a land trust and all beneficial interests in and powers of direction under any land trust); collect all rent, sale proceeds and earnings from real estate; convey, assign and accept title to real estate; grant easements, create conditions and release rights of homestead with respect to real estate; create land trusts and exercise all powers under land trusts, total possess, maintain, repair, improve, subdivide, manage, operate and insure real estate; pay, contest, protest and compliance real estate taxes and assessments; and, in general, exercise all powers with respect to real estate which the principal could if present and under no disability.
- (b) Financial institution transactions. The agent is authorized to: open, close, continue and control all accounts and deposits in any type of financial institution (which term includes, without limitation, banks, trust companies, savings and building and loan associations, credit arions and brokerage firms); deposit in and withdraw from and write checks on any financial institution account or deposit, and, in general, exercise all powers with respect to financial institution transactions which the principal could if present and or her no disability.
- (c) Stock and bond transactions. The agent is authorized or buy and sell all types of securities (which term includes, without limitation, stocks, bonds, mutual funds and all other types of investment securities and financial instruments); collect, hold and safekeep all dividends, interest, earnings, proceed of sale, distributions, shares, certificates and other evidences of ownership paid or distributed with respect to securities; exercise all voting rights with respect to securities in person or by proxy, enter into voting trusts and consent to limitations on the right to vote; and, in general, exercise all powers with respect to securities which the principal could if present and under no disability.
- (d) Tangible personal property transactions. The agent is authorized to: bt y and sell, lease, exchange, collect, possess and take title to all tangible personal property; move, store, ship, restore, mui tain, repair, improve, manage, preserve, insure and safekeep tangible personal property; and, in general, exercise all powers with respect to tangible personal property which the principal could if present and under no disability.
- (e) Safe deposit box transactions. The agent is authorized to: open, continue and have access to all safe deposit boxes; sign, renew, release or terminate any safe deposit contract, drill or surrender any safe deposit Loc; and, in general, exercise all powers with respect to safe deposit matters which the principal could if present and Loc of no disability.
- (f) Insurance and annuity transactions. The agent is authorized to: procure, acquire, continue, renew, terminate or otherwise deal with any type of insurance or annuity contract (which terms include, without limitation, life, accident, health, disability, automobile casualty, property or liability insurance); pay premiums or assessments on or surrender and collect all distributions, proceeds or benefits payable under any insurance or annuity contract; and, in general, exercise all powers with respect to insurance and annuity contracts which the principal could if present and under no disability.

- (g) Retirement plan transactions. The agent is authorized to: contribute to, withdraw from and deposit funds in any type of retirement plan (which term includes, without limitation, any tax qualified or nonqualified pension, profit sharing, stock bonus, employee savings and other retirement plan, individual retirement account, deferred compensation plan and any other type of employee benefit plan); select and change payment options for the principal under any retirement plan; make rollover contributions from any retirement plan to other retirement plans or individual retirement accounts; exercise all investment powers available under any type of self-directed retirement plan; and, in general, exercise all powers with respect to retirement plans and retirement plan account balances which the principal could if present and under no disability.
- (h) Social Security, unemployment and military service benefits. The agent is authorized to: prepare, sign and file any claim or application for Social Security, unemployment or military service benefits; sue for, settle or abandon any claims to any benefit or assistance under any federal, state, local or foreign statute or regulation; control, deposit to any account, collect, receipt for, and take title to and hold all benefits under any Social Security, unemployment, military service or other state, federal, local or foreign statute or regulation; and, in general, exercise all powers with respect to Social Security, unemployment, military service and governmental benefits which the principal could if present and under no disability.
- (i) Tax matters. The agent is authorized to: sign, verify and file all the principal's federal, state and local income, gift, esta'c, property and other tax returns, including joint returns and declarations of estimated tax; pay all taxes; claim, sue for and race're all tax refunds; examine and copy all the principal's tax returns and records; represent the principal before any independent of the principal 'nat' may be necessary for such purposes; waive rights and sign all documents on behalf of the principal 'nat' may be necessary for such purposes; waive rights and sign all documents on behalf of the principal as required to settle, pay and determine all tax liabilities; and, in general, exercise all powers with respect to tax matters which the principal could it present and under no disability.
- Claims and littg .ion. The agent is authorized to: institute, prosecute, defend, abandon, compromise, arbitrate, settle and dispose of any clair in I vor of or against the principal or any property interests of the principal; collect and receipt for any claim or settlement proceeds and waive or release all rights of the principal; employ attorneys and others and enter into contingency agree per is and other contracts as necessary in connection with litigation; and, in general, exercise all powers with respect to claims and litigation which the principal could if present and under no disability. The statutory short form power of attorney, for property does not authorize the agent to appear in court or any tribunal as an attorney-at-law for the principal or otherwise to engage in the practice of law without being a licensed attorney who is authorized to practice law in Illinois under applicable Illinois Supreme Court Rules.
- (k) Commodity and option transactions. The agent is authorized to: buy, sell, exchange, assign, convey, settle and exercise commodities futures contracts and call and put options on stocks and stock indices traded on a regulated options exchange and collect and receipt for all proceeds of such transactions; establish or continue option accounts for the principal with any securities or futures broker; and, ir, general, exercise all powers with respect to commodities and options which the principal could if present and under no disability.
- (hich term includes, without limitation, any farming, manufacturing, service, unining retailing or other type of business operation) in any form, whether as a proprietorship, joint venture, partnership, co.p. ration, trust or other legal entity; operate, buy, sell, expand, contract, terminate or liquidate any business; direct, control, supervise, manage or participate in the operation of any business and engage, compensate and discharge business managers, impleyees, agents, attorneys, accountants and consultants; and, in general, exercise all powers with respect to business interest, and operations which the principal could if present and under no disability.
- (m) Borrowing transactions. The agent is authorized to: borrow money; mortgage or plidge any real estate or tangible or intangible personal property as security for such proposes; sign, renew, extend, pay and satisfy any notes or other forms of obligation; and, in general, exercise all powers with respect to secured and unsecured porrowing which the principal could if present and under no disability.
- (n) Estate transactions. The agent is authorized to: accept, receipt for, exercise, release, reject, rer pun e, assign, disclaim, demand, sue for, claim and recover any legacy, bequest, devise, gift or other property interest or payment due or payable to or for the principal; assert any interest in and exercise any power over any trust, estate or property subject to fiduciary control; establish a revocable trust solely for the benefit of the principal that terminates at the death of the principal and is then distributable to the legal representative of the estate of the principal; and, in general, exercise all powers with respect to estates and trusts which the principal could if present and under no disability; provided, however, that the agent may not make or change a will and may not revoke or amend a trust revocable or amendable by the principal or require the trustee of any trust the benefit of the principal to pay income or principal to the agent unless specific authority to that end is given, and specific reference to the trust is made, in the statutory property power form.
- (o) All other property powers and transactions. The agent is authorized to: exercise all possible powers of the principal with respect to all possible types of property and interests in property, except to the extent limited in subsections (a) through (n) of this Section 3-4 and to the extent the principal limits the generality of this category (o) by striking out one of more of categories (a) through (n) or by specifying other limitations in the statutory property power form.

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LEGAL DESCRIPTION

PARCEL 1: UNIT NUMBER 109 IN THE VILLAGE GREEN ATRIUM SENIOR CITIZENS CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL **ESTATE:**

LOT 2 IN VILLAGE OF WILMETTE'S VILLAGE GREEN SUBDIVISION, BEING A SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 33, TOWNSHIP 42 NORTH, RANGE 13 EAST OF THE THIRT PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED AS EXHIBIT " A" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 26845550. TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN COOK COUNTY, ILLINOIS.

PARCEL 2: EASEMENTS APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH IN EASEMENT AGREEMENT DATED DECEMBER 1, 1982 AND RECORDED DECEMBER 7, 1982 AS DOCUMENT NUMBER 26432692 FOR INGRESS AND EGRESS OVER AND ACROSS THE SOUTH 4 FEET OF LOT 1 IN THE VILLAGE OF WILMETTE'S VILLAGE GREEN SUBDIVISION BEING A SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 33, AST OF COUNTY CICRAS OFFICE TOWNSHIP 42 NORTH, RANG : 13 EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

Address commonly known as: 800 Ridge Rd Unit 109 Wilmette, IL 60091

PIN#: 05-33-200-016-1009