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Karen A. Yarbrough Cook County Clerk

Date: 03/28/2023 03:15 PM Pg: 1 of 8

ILLINOIS STATUTORY SHORT FORM S. ATTO.

OUT COUNTY CONTROL

OTHER POWER OF ATTORNEY FOR PROPERTY

Brennan Law Offices, Ltd. Prepared by:

155 N. Michigan, Suite 700 Chicago, Illinois 60601

Kevin Brennan Mail to:

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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 to at 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 licer sed attorney who is authorized to practice law in Illinois.

The powers you give your agent are explained roore 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 it it, and what your agent will be able to do if you do sign it.

-Principal's initials

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POWER OF ATTORNEY FOR PROPERTY

1. I,	BRIANNA NEYLON,	hereby revoke all prior powers of attorney for property executed by me and
appoint: _	JAMES NEYLON	رـــــــ
	(NOTE: Yo	nu may not name co-agents using this form.)
powers, as defi-	ned in Section 3 4 of the 'Statutory	and in my name (in any way I could act in person) with respect to the following Short Form Power of Attorney for Property Law' (including all amendments), but ecified powers inserted in paragraph 2 or 3 below:
strike the title o	ust strike out any one or more of th of any category will cause the powe a line through the title of that cate	ne following categories of powers you do not want your agent to have. Failure to ers described in that category to be granted to the agent. To strike out a category gory.)
(a) Real 6	estate transactions.	
(b) Finan	cial institution transactions.	
(c) Stock	and bond cansactions.	
(d) Tangi	ble persona. F. C. arty transactions.	-
(e) Safe o	leposit-box transar . 16 ns.	
(f) Insura	unce and annuity transactions.	
(g) Retire	ement plan transactions	
(h) Social	l Security, employment and ail to	g -service benefits.
(i) Tax	matters.	
(j) Clai	ims and litigation.	
(k) Comr	nodity and option transactions.	
(1) Bus	iness operations.	4
(m) Borro	owing transactions.	
(n) Estate	e transactions.	
(e) All of	her property transactions.	40
(NOTE: Limita	tions on and additions to the agent	's powers may be included in this power of attorney if they are
specifically des	cribed below.)	
2 The no	overs granted above shall not inclu-	de the following powers or shall be meanled or limited in the following
particular		de the following powers of shall be interested of infinited in the total uning
		tions you deem appropriate, such as a prohibition or conditions on the sale
oj particular su	ock or real estate or special rules o	on vorrowing by the agent.)
		<u> </u>
3. In addi	ition to the powers granted above, l	I grant my agent the following powers:
(NOTE: Here y	ou may add any other delegable po	owers 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.)

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The power to make, execute, acknowledge, and deliver all miscellaneous documents, notes, trust deeds, mortgages, loan documents, assignments of rents, waivers of homestead rights, affidavits, ALTA statements, Master or other Settlement Statements and other instruments, including, but not limited to, a Personal Guaranty on any and all loan documents, and to endorse and negotiate checks and bills of exchange requisite or proper to effect the acquisition and financing of my interest, if any, in the real property commonly known as: 5015 Commonwealth Ave, Unit 505, Western Springs, IL 60558 (PIN: 18-07-109-037-1062).

(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 select) 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 componsation for services rendered as agent under this power of attorney.

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

6. () This power of attorney shall become effective on <u>THE DATE OF EXECUTION OF THIS INSTRUMENT.</u>

(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 pover in first take effect.)

الحصا		3 2 1 27 0 2 2000
7. (BP) This power of attorney shall terminate on	MAY 31, 2023

(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 price 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 shall die, become incompetent, resign or refuse to accept the office of agent, I me the following (each to act alone and successively, in the order named) as successor(s) to such agent:

For purposes of 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 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 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.

12. The authority granted under this Power of Attorney shall survive the disability of the Principal.

3/8/2013	B. 11. M
Dated: 3/8/2023 Signed	BRIANNA NEYLON
(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 c.s. witness.)	oy at teast one witness and your signature is notarized, using
The undersigned witness(es) certifies thatBRIA_NNA_NEYLON subscribed as principal to the foregoing power of atto ne), appeared by delivering the instrument as the free and voluntary act of the principal her to be of sound mind and memory. The undersigned with ass also mental health service provider or a relative of the physician or provided a health care facility in which the principal is a patient or resident sibling, or descendant of either the principal or any agent or successful to the principal or any agent or successful to the principal is by blood, marriage, or adoption; or (d) an agent or successful to the principal is by blood, marriage, or adoption; or (d) an agent or successful to the principal or any agent or age	efore me and the notary public and acknowledged signing and al, for the uses and purposes therein set forth. I believe him or certifies that the witness is not: (a) the attending physician or er; (b) an owner, operator, or relative of an owner or operator (c) a parent, sibling, descendant, or any spouse of such parent, agent under the foregoing power of attorney, whether such
Dated: 3/8/2023	1. 94.11.
Dated:	s (nemma)
Dated: 2/8/2023 Witnes	um shaan
State of Illinois) SS.	Co.
County of Cook) Du Page The undersigned, a notary public in and for the above county and state, of the to be the same person whose name is subscribed as principal to twitness(es) Brana Graben and End Ludman instrument as the free and voluntary act of the principal, for the uses and the signatures of the agent.	_, in person and acknowledged signing and delivering the
Dated: 03 08 2023	Kunherly Danner
	Notary Public
My commission expires: 00+060 315+, 2023.	KIMBERLY DAMMER Official Seal Notary Public - State of Illinois My Commission Expires Oct 31, 2023

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'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 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 experience 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 principa'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 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 mu disclose your identity as an agent whenever you in the fallow	ou act for the principal by		
signing your own name 'as Agent' in the follow	wing manner:		
	By:	his/he	r attorney in fact
		40	
The meaning of the powers granted to you is o			Act, which is incorporated
by reference into the body of the power of atto	orney for property docum	ent.	
If you violate your duties as agent or act outside		o you, you may be liable for any	damages, including
attorney's fees and costs, caused by your viola	ition.	(%)	
If there is anything about this document or you	ur duties that you do not i	understand, you should seek leg	al advice from an attorney.

Office

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AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I, <u>JAMES NEYLON</u> , certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for <u>BRIANNA NEYLON</u> .						
I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.						
I accept appointment as agent under this power of attorney.						
This certification and acceptance is made under penalty of perjury.*						
Dated:						
(Agent's Signature)						
*(NOTE: Perjury is defined in Sector. 32.2 of the Criminal Code of 1961, and is a Class 3 felony.)						

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JNO ERFAL DESCRIPTION C

PARCEL 1: UNIT 5015 COMMONWEALTH AVENUE IN COMMONWEALTH IN THE VILLAGE, A CONDOMINIUM, AS DELINEATED ON THE SURVEY OF CERTAIN LOTS OR PARTS THEREOF IN COMMONWEALTH IN THE VILLAGE UNIT 1, UNIT 2, AND UNIT 3, A RESIDENTIAL PLANNED UNIT DEVELOPMENT, BEING A RESUBDIVISION LOCATED IN PARTS OF THE EAST ½ OF THE NORTHWEST 1/4 AND WEST ½ OF THE NORTHEAST 1/4 OF SECTION 7, TOWNSHIP 38 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED AS EXHIBIT "A" TO THE DÉCLARATION OF CONDOMINIUM OWNERSHIP RECORDED OCTOBER 29, 1993 AS DOCUMENT NUMBER 93877638, AS AMENDED FROM TIME TO TIME, IN COOK COUNTY, ILLINOIS, TOGETHER WITH AN UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS APPURTENANT TO SAID UNIT, AS SET FORTH IN SAID DECLARATION.

PARCEL 2: NON-EXCLUSIVE EASEMENT FOR INGRESS AND EGRESS FOR THE BENEFIT OF PARCEL 1 CREATED IN THE PLAT OF COMMONWEALTH IN THE VILLAGE UNIT 1 AND UNIT 2, A RESIDENTIAL PLANNED UNIT DEVELOP-MENT, OVER, UPON AND ACROSS OUTLOT "A" THEREOF, RECORDED DECEMBER 29, 1992 AS DOCUMENT NUMBER 92980475 AND 9280476 AND RE-RECORDED MARCH 3, 1995 AS DOCUMENT NUMBER 95148098.

mber: 18
Of Coot County Clerk's Office Address of Real Estate: 3015 Commonwealth Avenue, Unit 5015, Western Spring, Illinois 60558

Permanent Real Estate Inde. Number: 18-07-109-037-1062