Doc#. 2316313445 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 06/12/2023 02:25 PM Pg: 1 of 6

Please return to:

POWER OF ATTORNEY

Chicago. U. 60631

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEN ENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY, YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3 - 4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR I ROPERTY LAW" OF WHICH THIS FORM IS A PART (SEE THE BACK OF THIS FORM) THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

POWER OF ATTORNEY made this and day of MAN (month) 2023 (year).

1. FRANK W. MONDANE , (insert name and address of principal) hereby appoint:

TOSEPH MAGNELLI OF 408 WALDEN LN. PROSPECT MEIGHTS IL 60070 (insert name and address of agent) 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 - 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 or below:

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATECORIES 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 transactions.
- (b) Financial institution transactions.
- (c) Stock and bond transactions.
- (d) Tangible personal property transactions.

- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (h) Social Security, employment and military service benefits.
- (i) Tax matters.
- (i) Claims and litigation.
- (k) Commodity and option transactions.
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estrie ransactions.
- (o) All other property powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

The powers granted above shall not include the following powers or shall be modified or limited in the following particulars (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):
0/
In addition to the powers granted above, I grant my seent the following powers (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 tenants or revoke or amend any trust specifically referred to below):

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSON) AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE FOWERS 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 THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)

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.

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

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

(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 EITHER (OR BOTH) OF THE FOLLOWING:)





() This power of attorney shall ter nivate on <u>fure</u> 22, 2023 (insert a future date or event, such as court determination of your disability, when you want this power to terminate prior to your death)

(IF YOU WISH TO NAME SUCCESSOR ACENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

If any agent named by me shall die, become incomperagent, I name the following (each to act alone and successor(s) to such agent:	tent, resign or refuse to accept the office of accessively, in the order named) as
•	For purposes of this paragraph, a person
shall be considered to be incompetent if and while the incompetent or disabled person or the person is unable consideration to business matters, as certified by a lice	e to give prompt and intemgent

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

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. 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.

1/WM		
Signed		(principal)
-		
YOU MAY, BUT ARE NOT REQUIRED TO, RE	QUEST YOUR AC	ENT AND
SUCCESSOR AGENTS TO PROVIDE SPECIME	N SIGNATURES B	ELOW. IF YOU
INCLUDE SPECIMEN SIGNATURES IN THIS P	OWER OF ATTOR	NEY, YOU MUST
COMPLETE THE CERTIFICATION OPPOSITE	THE CICALATI INT	OF THE AGENTS.)
COMPLETE THE CERTIFICATION OPPOSITE	LUE SIGNATORE	Of THE HOLEKTON
	Loomify that the cit	gnatures of my agent
Specimen signatures of	(and successors) ar	en correct
agent (and successors)	•	(
(agent)		(principal)
(successor agent		
(successor agent	,	(principal)
100		CO IT ICNOTADIZED
(THIS POWER OF ATTORNEY WILL NOT BE	EFFECTIVE UNLE	SS 11 IS NOTARIZED
AND SIGNED BY AT LEAST ONE ADDITIONA	AL WITNESS, USIN	NG THE FORM
BELOW.)		
Ox		
State of ICLINOIS		
County of cook		
The undersigned, a notary public in and for the abo	ve county and state.	certifies that
	known to me to b	e the same person whose
name is subscribed as principal to the foregoing po	_, known to me to a	eared before me and the
additional witness in person and acknowledged sig	ning and delivering	the instrument as the free
additional witness in person and acknowledged sig and voluntary act of the principal, for the uses and	ning and derivering	forth (and certified to
and voluntary act of the principal, for the uses and	nut poses atorom sec	101111 (3 111111 11111111111111111111111
the correctness of the signature(s) of the agent(s)).	ACTEAT A	
** . 1 ///// 13 1-27	(SEAL)	necirial ceal ?
Dated: M44 22 2023		OFFICIAL SEAL
Bin D. Cast		GEORGE LACORTE
De Cott		GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS
De Cott	- C/	GEORGE LACORTE
Notary Public My commission expires 5-19-25	C	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK	MONDAME	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK The the the same parent whose name is subscribe	d as principal to the	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore roing power of
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe	d as principal to the and acknowledged	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print	d as principal to the and acknowledged cipal, for the uses a	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing, and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print forth. I believe him or her to be of sound mind and	d as principal to the and acknowledged cipal, for the uses at memory.	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing, and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print forth. I believe him or her to be of sound mind and	d as principal to the and acknowledged cipal, for the uses at memory.	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing, and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print forth. I believe him or her to be of sound mind and	d as principal to the and acknowledged cipal, for the uses at memory.	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing, and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print forth. I believe him or her to be of sound mind and	d as principal to the and acknowledged cipal, for the uses at memory.	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print	d as principal to the and acknowledged cipal, for the uses at memory.	GEORGE LACORTE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing, and delivering the
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the prin forth. I believe him or her to be of sound mind and Dated: MM 22, 2023 Witness KAMIL CHOTNOWSKI	as principal to the and acknowledged cipal, for the uses at memory(SEAL)	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the and purposes therein set
Notary Public My commission expires 5-19-25 The undersigned witness certifies that Flank me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the print forth. I believe him or her to be of sound mind and Dated: MAY 22, 2023 Witness KAMIL CHOTNOWSKI	and acknowledged cipal, for the uses an memory. (SEAL)	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the nd purposes therein set
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the prin forth. I believe him or her to be of sound mind and Dated: MAY 22, 2023 Witness KAMIL CHOTNOWSKI (THE NAME AND ADDRESS OF THE PERSON INSERTED IF THE AGENT WILL HAVE POW	and acknowledged cipal, for the uses an memory. (SEAL)	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the nd purposes therein set
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the prin forth. I believe him or her to be of sound mind and Dated: MAY 22, 2023 Witness KAMIL CHOTNOWSKI (THE NAME AND ADDRESS OF THE PERSON INSERTED IF THE AGENT WILL HAVE POW ESTATE.)	and acknowledged cipal, for the uses an memory. (SEAL)	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the nd purposes therein set
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the prin forth. I believe him or her to be of sound mind and Dated: MAY 22, 2023 Witness KAMIL CHOTNOWSKI (THE NAME AND ADDRESS OF THE PERSON INSERTED IF THE AGENT WILL HAVE POW ESTATE.)	a as principal to the and acknowledged cipal, for the uses at memory. (SEAL) PREPARING THE ER TO CONVEY A	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing and delivering the and purposes therein set IS FORM SHOULD BE ANY INTEREST IN REAL
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the prin forth. I believe him or her to be of sound mind and Dated: MAY 22, 2023 Witness KAMIL CHOTNOWSKI (THE NAME AND ADDRESS OF THE PERSON INSERTED IF THE AGENT WILL HAVE POW ESTATE.)	a as principal to the and acknowledged cipal, for the uses at memory. (SEAL) PREPARING THE ER TO CONVEY A	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to fore Joing power of signing and delivering the and purposes therein set IS FORM SHOULD BE ANY INTEREST IN REAL
Notary Public My commission expires 5-19-25 The undersigned witness certifies that FRANK me to be the same person whose name is subscribe attorney, appeared before me and the notary public instrument as the free and voluntary act of the prin forth. I believe him or her to be of sound mind and Dated: MAY 22, 2023 Witness KAMIL CHOTNOWSKI (THE NAME AND ADDRESS OF THE PERSON INSERTED IF THE AGENT WILL HAVE POW ESTATE.)	a as principal to the and acknowledged cipal, for the uses at memory. (SEAL) PREPARING THE ER TO CONVEY A	george Lacorte NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 5/19/2025 , known to foregoing power of signing and delivering the and purposes therein set IS FORM SHOULD BE ANY INTEREST IN REAL

2316313445 Page: 6 of 6

UNOFFICIAL COPY

LEGAL DESCRIPTION

Order No.: 23004449PK

For APN/Parcel ID(s): 12-24--110-001-0000

LOT 1 IN CAHILL'S EIGHT ADDITION TO CHICAGO, BEING A SUBDIVISION IN THE NORTHWEST Ah.
CTION
I, IN COC.

COOK
COUNTY
Clerk's Office 1/4 OF SECTION 24, TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL

MERIZIAN, IN COOK COUNTY, ILLINOIS.