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CEDRIC GILES

COOK COUNTY CLERK'S OFFICE

Date 4/23/2024 12:01 PM Pg: 1 of 5

POWER OF ATTORNEY

EXHIBIT "A"

UNIT 2402-12 IN COACH LIGHT CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE:

PART OF THE WEST HALF OF THE WEST HALF OF THE EAST HALF OF SECTION 8, TOWNSHIP 41 NORTH, RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN;

AND AS MORE FULLY DESCRIBED IN THE AFORESAID SURVEY WHICH IS ATTACHED AS EXHIBIT "D" TO THE DECLARATION OF CONDOMINIUM RECORDED MARCH 10, 1980 AS DOCUMENT 25385416, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS.

Property Address: 2402 ALGONQUIN RD UNIT 12 ROLLING MEADOWS, IL 60008
Parcel ID Number: 08-08-106-024-1114

Prepared By:
Carlene Kay
C Kay Law, LLC
P.O Box 6677
Elgin IL 60121

AT 240215 2of4
After recording mail to:
Altima Title, LLC.
6444 N. Milwaukee Ave.
Chicago, IL 60631
Ph. 312-651-6070

MD

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, **Barbara Barlo**, of 3735 Winston Drive, Hoffman Estates, IL 60192 hereby appoint: **Anthony Barlo** of 3735 Winston Drive, Hoffman Estates, IL 60192, as my attorney in fact (my 'agent') to act for me and in my name (in any way I could act in person) with respect to the following powers, as defined in Section 3-4 of the 'Statutory Short Form Power of Attorney for Property Law' (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below.

(NOTE: You must strike out any one or more of the following categories of powers you do not want your agent to have. failure to strike the title of any category will cause the powers described in that category to be granted to the agent. to strike out a category you must draw a line through the title of that category.)

- (a) Real estate 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.
- (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:

The powers granted herein are limited to: the purchase of 2402 Algonquin Road, Unit 12, Rolling Meadows, IL 60008 and authorization to sign all closing documents and loan documents for a loan of \$157,500.

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

3. In addition to the powers granted above, I grant my agent the following powers: The power to sign mortgage any and all loan documents, title company documents, or other documents necessary to effectuate the purchase of the property listed in number 2 above.

(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 the next sentence, otherwise it should be struck out.)

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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 the next sentence 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 initialling and completing one or both of the paragraphs 6 and 7.)

6. (X) This power of attorney shall become effective on: Thursday, April 18, 2024.

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

7. (X) This power of attorney shall terminate on: Monday, April 26, 2024

(NOTE: If you wish to name successor agents, insert the name(s) and address(es) of such successor(s) in the following paragraph.)

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 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 matters, as certified by a licensed physician.

(NOTE: If you wish to, you may name your agent as guardian of your estate in the event a court decides that one should be appointed. To do this, retain the following paragraph and the court will appoint your agent if the court finds that such 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.

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(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 this 15 day of April, 2024.

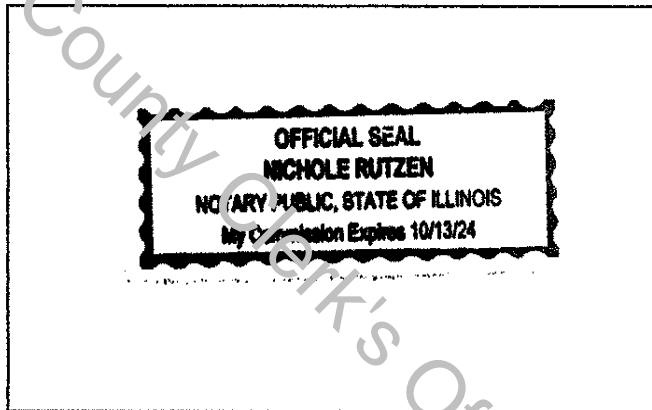
Signed Barbara Barlo
Barbara Barlo

(NOTE: This power of attorney will not be effective unless it is notarized and signed by at least one additional witness using the form below.)

State of Illinois)
County of COOK) SS

The undersigned, a notary public in and for the above county and state, certifies that Barbara Barlo, 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 additional 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: 4/15/24 (SEAL)
[Signature]
Notary Public



The undersigned witness certifies that Barbara Barlo, 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: 4/15/24 (SEAL)

[Signature]
Witness signature

Greg Rutzen
Print name