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WARRANTY DEED
Statutory (ILLINOIS)
(Individual to Individual)

CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form makes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose.

THE GRANTOR, MARIE I. BUCKLEY, a spinster,

of the Village of Glenview, County of Cook
State of Illinois for and in consideration of
TEN DOLLARS.

96204639

and other valuable consideration in hand paid,
CONVEYS and WARRANTS to

Brad P. Yurk & Jill E. Yurk^{**}, his wife, & Fred H. Yurk^{*}
2741 Brassie Lane
Glenview, Illinois

(The Above Space For Recorder's Use Only)

NAME(S) AND ADDRESS OF GRANTEE(S)

in Tenancy in Common, ~~but in JOINT TENANCY~~, the following described Real Estate situated in the
County of Cook in the State of Illinois, to wit:

* as to 50% interest as Tenant in Common
** as to 50% interest as Tenants in Common

DEPT-01 RECORDING \$17.00
T49999 TRAN 4066 05/03/90 12:37:00
49916 G *-90-204699
COOK COUNTY RECORDER

Lot 24 in Golf Meadows unit no. 2 subdivision of
part of Lot 18 in County Clerks division of
Section 34, Township 42 North, Range 12, East of
the Third Principal Meridian, as shown on the plat
recorded December 15, 1953 as document 15,792,571,
in Cook County, Illinois

Subject to real estate taxes for 1989 and subsequent
years and to easements, covenants and conditions of
record.

96204639

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of
Illinois, TO HAVE AND TO HOLD said premises ~~not in tenancy in common, but in joint tenancy for ever~~.

Permanent Real Estate Index Number(s): 04-34-307-001

Address(es) of Real Estate: 2741 Brassie Lane Glenview, Illinois

DATED this 30 day of April 1990

MARIE I. BUCKLEY

By: William J. Buckley (SEAL) (SEAL)

William J. Buckley, as Attorney in-Fact

~~Undekl ta i dduabli hower to El hri tdkny~~

(SEAL) (SEAL)

PLEASE PRINT OR
TYPE NAME(S)
BELOW
SIGNATURE(S)

State of Illinois, County of Cook, I, the undersigned, a Notary Public in and for
said County, in the State aforesaid, DO HEREBY CERTIFY that
William J. Buckley, as Attorney in-Fact

IMPRESS
NEAL
HERRI

personally known to me to be the same person whose name is subscribed
to the foregoing instrument, appeared before me this day in person, and acknowl-
edged that he signed, sealed and delivered the said instrument as his
free and voluntary act, for the uses and purposes therein set forth, including the
release and waiver of the right of homestead.

Given under my hand and official seal, this

SEAL
THOMAS J. YOUNG
NOTARY PUBLIC
OFFICIAL SEAL
THOMAS J. YOUNG, ATTORNEY AT LAW
156 S. MAIN ST. CHICAGO, IL 60618

April 1990

Commission expires

This instrument was prepared by

MAIL TO { Mathew Szygowski
955 West Madison Street
Chicago, IL 60607

SEND SUBSEQUENT TAX BILLS TO

Fred Yurk
2741 Brassie Lane
Glenview, IL 60025

OR RECORDER'S OFFICE BOX NO. 15

STATE OF ILLINOIS
REAL ESTATE TRANSFER TAX
\$ 148.00
REVENUE

Cook County
REAL ESTATE TRANSACTION TAX
\$ 74.00

258868 1 of 3 AT

65940200

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Warranty Deed

JOHN J. FANNING
INDIVIDUAL FOUNDER

TO

GEORGE E. COLE
LEGAL FORMS

Property of Cook County Clerk's Office

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 A POWER IS EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM. 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 MORE FULLY EXPLAINED IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART (SEE 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 YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

THIS IS TO CERTIFY THAT THIS IS A TRUE AND EXACT COPY OF THE ORIGINAL DOCUMENT

BY Marie I. Buckley

POWER OF ATTORNEY made this 10th day of September, 1989

I, MARIE I. BUCKLEY
hereby appoint: WILLIAM J. BUCKLEY

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 4 below:

(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.

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- (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.

(LIMITATIONS ON AND ADDITIONS TO THE AGENTS'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 (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):

3. In addition to the powers granted above, I grant my agent 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 THE 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.)

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 shall 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

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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.

(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:

6. () This power of attorney shall become effective on _____

(insert a future date or event during your lifetime, such as court determination of your disability, when you want this power to first take effect).

7. () This power of attorney shall terminate on _____

(insert a future date or event during your lifetime, such as court determination of your disability, when you want this power to terminate prior to your death.)

(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 legally disabled, resign or refuse to act, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

PAUL J. BUCKLEY HOUSTON TEXAS

(IF YOU WISH TO NAME A GUARDIAN OF YOUR PERSON OR A GUARDIAN OF YOUR ESTATE, OR BOTH, IN THE EVENT THAT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY INSERTING THE NAME(S) OF SUCH GUARDIAN(S) IN THE FOLLOWING PARAGRAPHS. THE COURT WILL APPOINT THE PERSON NOMINATED BY YOU IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. YOU MAY, BUT ARE NOT REQUIRED TO, NOMINATE AS YOUR GUARDIAN(S) THE SAME PERSON NAMED IN THIS FORM AS YOUR AGENT.)

9. If a guardian of my person is to be appointed, I nominate the following to serve as such guardian:

(insert the name and address of nominated guardian of the person)

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10. If a guardian of my estate (my property) is to be appointed, I nominate the following to serve as such guardian:

(insert the name and address of nominated guardian of the estate)

11. 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.

signed X Marie Buckley
(principal)

(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENT(S) 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)

X _____
(agent)

(successor agent)

(successor agent)

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

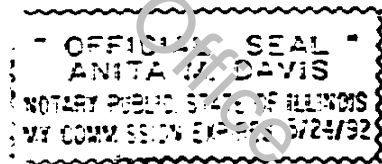
X Marie Buckley
(principal)

(principal)

(principal)

THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED, USING THE FORM BELOW.)

State of Illinois)
County of Cook)



The undersigned, a notary public in and for the above county and state, certifies that MARIE I. BUCKLEY

known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me 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, (and certified to the correctness of the signature(s) of the agent(s)).

Dated: 9-18-89

SEAL

Anita M. Davis
Notary Public

My commission expires 3-24-92

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(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE.)

This document was prepared by:

THIS INSTRUMENT WAS PREPARED BY

THOMAS L. YOUNG, ATTORNEY AT LAW

186 S. MAIN ST. LEWISVILLE, ILL. 60090

Property of Cook County Clerk's Office