

know all men by these presents, which are intended to constitute a Durable Power of Attorney, that I, SOPHIE ZAREMBA (SSN: 394-12-2228), the undersigned, a single woman, the widow of ROBERT ZAREMBA, deceased, age seventy (70) years (DOB: 04-17-20), of Route 2, Box 402-T, Leighton, Colbert County, Alabama 35646, do hereby make, constitute and appoint my daughter, LINDA C. MCLUNG (SSN: 360-31-9134), of Route 2, Box 402-X, Leighton, Alabama 35646, as my true and lawful attorney in fact, for me and in my name, place and stead, and on my behalf and for my use and benefit, to do, perform and execute all and every act that I may legally do through an attorney-in-fact, and I grant every proper power necessary to carry out the purposes for which this power is granted, with full power of substitution and revocation, hereby ratifying and affirming that which she shall lawfully do or cause to be done, including but not limited to the full power and authority to do the following:

To sign my name to checks and drafts on all my bank accounts, checking accounts, savings accounts, pass books, certificates of deposit, and all other deposits and instruments;

To endorse my name on all checks, drafts, and instruments;

To deposit funds to my accounts;

To withdraw funds from my accounts, and to open new accounts;

To cash, renew, redeem, deposit, re-deposit, and expend all my certificates of deposit, and to purchase new certificates of deposit;

To pay all my bills;

To obtain all information about me from all physicians, surgeons, clinics, hospitals, nurses and nursing services, and any other public or private agency, person, firm, organization, or institution;

To consent to and to contract in my name for all medical care including nursing care, physicians' services, surgeons' services, hospitalization, surgery, anesthesiology, radiology, physical therapy, and all other medical, hospitalization, and nursing care;

To apply in my name for Medicare, Medicaid, Social Security benefits, insurance benefits, and all other benefits;

To apply for, to obtain, and to pay for health insurance, medical insurance, property insurance, casualty insurance, liability insurance, and to maintain, renew, or cancel existing insurance, for my person and property;

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The rights, powers and authority of my said attorney-in-fact herein granted shall commence and be in full force and effect on the date hereof; the authority conferred herein shall not be affected by my disability, incompetency, or incapacity, or lapse of time, and such rights, powers and

By mentioning these specific matters, I do not limit my attorney's authority, but I want the authority of each to be absolutely clear with respect to those matters in particular. Since it is impossible to list every durable power of attorney should be construed and interpreted in the broadest sense, because I have complete confidence in my said attorney-in-fact.

To appear on my behalf before the Chicago Board of Education Municipal Pension Fund and to do any acts necessary to continue my eligibility to receive my deceased husband's pension, including the right to sign my name, and to do any other acts necessary to secure and receive my benefits.

To negotiate and sign contracts for the sale of all my real estate specifically including the property at 2229 West Homer, Chicago, Illinois, and to execute all necessary deeds and conveyances for me and in my behalf to carry out such contracts and conveyances, and to receive all funds on my behalf, and to do whatever else is necessary to complete such transactions; and

To demand, receive, collect, recover, compromise or settle accounts, legacies, requests, interest, dividends, royalties, debts and other obligations which may be due, owing or payable to me or which may hereafter become due, owing or payable to me;

To sell, transfer, assign, endorse, redeem, execute, purchase, pay for and deal with all stocks, bonds, mutual funds, and other securities; and to deposit, use, manage, spend, and administer all proceeds and income from any financial transactions, and all income and proceeds from any other sources whatsoever.

To sign and file my state and federal tax returns including amended returns, to pay my taxes, to receive and deposit my refunds, and to represent me before the Internal Revenue Service and the State of Alabama Department of Revenue;

To administer, handle, expedite, and deal with all my personal affairs, business affairs, financial affairs, and other matters;

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William Tipton Johnson, Jr.  
Attorney at Law  
103 East 5th Street  
Tusculum, Alabama 35674  
(205) 383-5082

Prepared by:

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\*A\* 2869 + 90-391053  
COOK COUNTY RECORDER

Notary Public

Given under my hand this 29th day of May, 1990.

I, the undersigned authority, a Notary Public in and for said County in said State, hereby certify that SOPHIE ZAREMBA, the person whose name is signed to the foregoing Durable Power of Attorney and who is known to me, acknowledged before me on this day that, being informed of the contents of said Durable Power of Attorney, she executed the same voluntarily on the day the same bears date.

STATE OF ALABAMA  
COUNTY OF COLBERT

SOPHIE ZAREMBA

*Sophie Zarembo*

authority shall remain in full force and effect hereafter until my death. The powers herein granted to my said attorney-in-fact shall be exercisable by her from time to time, and at any time hereafter and during any disability, incompetency, or incapacity. Any action taken in good faith pursuant to the foregoing authority without actual knowledge of my death shall be binding upon me, my heirs, assigns and personal representatives. I hereby hold harmless and release my said attorney-in-fact and any person, firm, corporation, or institution relying upon this durable power of attorney and upon the representations of my said attorney-in-fact.

In witness whereof, as Principal, I have signed this Durable Power of Attorney at Tusculum, Alabama, this 29th day of May, 1990, and I have directed that photographic copies of this Power be made which shall have the same force and effect as an original.

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Colbert Co. Alabama  
Rt. 2 Box 402  
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