GENERAL POWER OF ATTORNEY

	I,	MYRT	LE	MAY	NARD	of	7318	s.	Wab	ash,	Ch	icag	, 0	Illin	ois,	. ,
hereb	ру а	ppoi	.nt	DOR	OTHY	E.	JOHN	SON	of	7318	s.	Waba	sh,	Chic	ago,	
Illin	ois	to	be	my	attor	ney	to	exe	ccia	e the	e fo	llow	ing	powe	rs i	in my
name	and	on	my	beh	alf.											Q
anv a	ر_ر موجود	int.	Bar	kin	g and	i Sa	fe D	epos	sit	Boxes	<u>3</u> .	To d	lepo	sit m	oney	, in

- () Payment of Bills. To pay all bills for household and other expenses incurred for [my] [the] support and medical care [of my spouse and me] [or for the support and medical care of my dependents], including hospital bills, nursing home bills, doctors' bills and nurses' bills; [and to pay my taxes, wages of employees and insurance premiums.]
- Gifts. To make gifts on my behalf to any one or more of my dependents [and their spouses] [and organizations to which transfers are deductible for federal gift tax purposes] if, in my attorney's judgment, I would want such gifts to be made and such gifts do not unduly jeopardize my financial security. (No gift [other than a gift to an organization to which transfers are deductible for federal gift tax purposes] shall in any calendar year be in excess of the amount of the annual gift tax exclusion.]
- () Sale and Management of Property. To sell, lease, mortgage, improve, repair and in all other respects manage and deal with my property, real or personal, and to employ brokers Nations Title Agency of Illinois, inc.

246 E. Janata Blvd. Ste. 300 Lombard, IL 60148

の合言を言うない。

95-9210

363133349

Property of Cook County Clerk's Office

and agents in connection therewith; to invest and reinvest in any stocks, bonds or other securities or property of any kind or nature, real or personal; to exercise any option to purchase property; to vote my stock or other securities and sign proxies; to insure my property against loss or damage by fire or other casualty and to insure me and my attorney against liability with respect thereto; [to collect rents and to collect the proceeds of any sale or mortgage of my real property, and to execute and deliver any and all instruments which my attorney may deem advisable in connection therewith, including contracts, leases, deeds of general warranty, releases of homestead and dower, restrictive covenants, mortgages and assignments of rent, and plats of subdivision, dedication and annexation;] and in all other respects manage and deal with my property as fully as I myself could do.

Taxss.* To execute and to file my income tax return, gift tax return of declaration of estimated tax for any year, or any other tax return or report; to represent me before any office of the Internal Reverse Service, the Illinois Department of Revenue or in any administrative agency or court with respect to any tax matters; to receive confidential information; to receive checks in payment of any cofund of income or other taxes, penalties or interest; to execute waivers or restrictions on assessment or collection of times: to execute closing agreements in respect to a tax liability for a specific matter; to execute protests to a determination of taxes by a district director; to file petitions in the Tax Court of the United States or suits for refund of taxes in any United States District Court or in the Court of Claims; and in general to represent me with respect to any income, property, excise or other tax matters, federal, state or local.

*IT MAY BE PREFERABLE TO SIGN IRS POWER OF ATTOMOLY FORM 2848 THAN TO RELY ON THIS CLAUSE.

*EITHER OR BOTH ALTERNATIVES MAY BE USED. THE SECOND ALTERNATIVE SHOULD NOT BE DELETED WHERE THE ATTORNEY IS DESIGNATED J'ARDIAN IN THE "DURABILITY" CLAUSE.

- $(\underline{\smile})$ Collection of Assets. To demand, sue for, collect, receive and give discharges for all sums of money and other personal property whatsoever as are now or shall hereafter become due, payable or belonging to me.
- () Transfer of Assets to Trust. To transfer any assets of mine to [] or any [other trust] created by me for management of my assets.
- (<u>Medical Care</u>. To employ or dismiss doctors, nurses or domestic servants to care for me; to admit me to or secure my release from any hospital; to consent to or reject on my behalf any treatment or surgical procedure for any injury or disease from which I may be suffering; and to have access to any medical

Property of Cook County Clerk's Office

records or communications, oral or written, pertaining to my physical or mental condition. Any doctor or hospital shall incur no liability in relying on this Power of Attorney in divulging information as to my mental or physical condition.

Durability. This Power of Attorney shall continue in effect until revoked by me personally at a time when I am competent to transact business. In the event I am adjudged incompetent or a disabled person, I designate the person named herein as my attorney to be appointed by a court as the guardian of my person [and my estate] [and I designate as guardian of my estate]. [If [my attorney fails or ceases to act as [auch] guardian [of my person],] I designate as such guardian.] I excuse any guardian designated by me from giving bond, or security or surety thereon.

(i) General. For the aforesaid purposes to sign my name and execute in my name and on my behalf all deeds, notes, mortgages, contracts, tax returns, instruments and documents whatsoever and do everything necessary or desirable for the accomplishment of any of the powers herein conferred and also to appoint and remove at my attorney's pleasure any substitute for or agent under my attorney. No person paying any money or delivering any property to my attorney shall be bound to see to the application thereof. Every person dealing with my attorney shall incur no liability in relying on this instrument until that person receives actual notice of ics revocation. My attorney shall have the power to exercise any or all of the powers herein conferred. I hereby ratify and confirm everything which my attorney, or any substitute or agent appointed by my attorney, shall do or cause to be done.

IN WITNESS WHEREOF, I have executed this instrument on 1995.

MYRTLE MAYNARD

The signature of my attorney appears below for purposes of identification.

BOYT BARRE

Property of Cook County Clerk's Office

96113389

STATE OF ILLINOIS)
COUNTY OF COOK)

Perminer

I, the undersigned, a Notary Public in and for the said County, in the State aforesaid, to hereby certify that MYRTLE MAYNARD, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me in person and acknowledged that such person signed and delivered the said instrument as such person's 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 on the

Notary Public

My commission expires:

OFFICIAL SEAL JAMES E GORMAN

NOTARY PUBLIC STATE OF FLINGIS MY COMMISSION (XORES 10 27 98

The principal, MYRTLE MAYNARD, signed this grant of a General Power of Attorney in our presence on the date it bears. Immediately thereafter, at the principal's request and in the principal's presence and in the presence of each other, we signed our names as witnesses. We certify that we believed the principal to be of sound mind and memory at the time of signing.

lita trundulta Address: 5/28 3 Bishur

Address:

Thicago Gl

MM

Property of Cook County Clerk's Office

963.4.4.369

RECORDING CHECKIER

G L													
1	THE CORDING (C) HOS (C) (SOLVE LIVE)												
	COUNTY COOK FILEH 95-9210 CLOSER TANKE MONTGON												
	CLOSING DATE \$\frac{15}{5}\$ DISBURSEMENT DATE \$\frac{35-9210}{5000 Medical Months of the first o												
L	1)LATER DATE FORM												
A	DEED - STATEMENT OF GRANTOR/GRANTEE - MAPPING SYSTEM (COOK COUNTY) PLUS COPY												
IT.	MORTGAGE AND RIPERS (ORIGINALS) PLUS COPY ORIGINAL) PLUS COPY												
L	5) RELEASES (ORIGINAL) PLUS COPY												
A	6) ILLINOIS DEPARTMENT OF REVENUE TRANSFER DECLARATION (ORIGINAL - GREEN SHEET)												
٧	7) COOK COUNTY TRANSFER DECLARATION (ORIGINAL) 8) CITY/VILLAGE REAL ESTATE TRANSFER DECLARATION (ORIGINAL)												
Poly	9)CHICAGO TITLE AND TRUST RELEASE DEED (ORIGINAL) PLUS COPY OR- ORIGINAL CANCELLED NOTE & TRUST DEED												
	RECORD THIS MORTGAGE BEFORE/AFTER DISBURSEMENT AND RETURN TO - LOMBARD												
*	ATTN: RECORDING DEPARTMENT												
Ufa) second in												
Doll	othy & Johnson & Gus Maynasson & Gus Maynasson Mystle Maynasson												
1318													
Mica	-L . 1												

00.624

\$1917 \$ BH #-69-113386

140009 TRAN 0990 02/09/96 16:01:00

\$35"28

COR COUNTY RECON.

(2) 12 2 FRH #
(2) 12 2 FRH #
(3) 12 2 FRH #
(4) 12 2 FRH #
(5) 12 2 FRH #
(6) 12 2 FRH #
(7) 140009 TRAN 01.