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Cook County Recorder

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## 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, disbursements 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-agonts. Unless you expressly limit the duration of this power in the manner provided below, until you revoke this power of 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 Property Law" of which this form is a part (see the back of this form). That law expressly permits the use of any different form or 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 20 th  | day of MA-RCH 1998  |
|--|---|
|  | (Month, Year)   |
| 1. 1. Paul B Ballin, Jr.   |   |
| (Name and  | Address of Principal)   |
| Peterson Health Center   | 6141 N. Pulaski Chgo, II 60646  |
| hereby appoint: Franziska Naugl  | 9   |
| (Name and  | d Address of Agent)   |
| 2301 183rd St H  | omewood, II 60430   |
| as my attorney-in-fact (my "agent") to act for me an for the following powers, as defined in Section 3-4 Law" (including all amendments), but subject to an in paragraph 2 or 3 below: | d in my name (in any way I could set in person) with respect of the "Statutory Short Form Power of At orney for Property y limitations on or additions to the specified cowers inserted are cetegories of powers you do not went 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.

(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.
- (a) Retirement plan transactions.

- (i) Tax matters.
- (j) Claims and litigation.
- (k) Commodity and option transactions.
- (I) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

(h) Social Security, employment and military service benefits.

To strike out a category you must draw a line through the title of that category.)

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| (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 (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): |
|  |
|  |
|  |
|  |
| Q <sub>x</sub>   |
| 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 thatton, 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):          |
| Specifically the sale of Unit (0) at 1600 W. Greenlead, Chipago, 14.   |
| Specifically, the sale of Unit 403 at 1600 W. Greenlead, Chinago, 14.  Legal Description: Unit 403 toyotacr with its undivided presentage interest in the Common   |
| Elements in Greenlead Condominium as Delineated and Detined in the Declaration Recorded as Doc.  |
| 26869483, as unreaded from time to time, in Seitins 31 and 32, Towiship 41 Note  |
| Range 14, East of the 3rd Principal Meridian, in Cook County, Illinois   |
| PIN # 11-31-208-031-1032   |
|  |

(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.)

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.

(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.

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| (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, 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 Ame(s) and address(es) of such successor(s) in the following paragraph.)  |
| 8. If any agent named by me shall die, become incompe(ep), 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:   |
| Loretta Bunson 6443 N Newgord Chap 60626  |
| · O/Z   |
|   |
| $O_{S_{c}}$   |
| 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.   |
| (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 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.   |

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| 10. I am fully informed as to all the contents of to my agent.   | this form and understand the full import of this grant of powers  |
|--|---|
| Signed, Principal: Aza Wife to   |   |
| an <u>na pagangangangangangangangangangangangangan</u>   | (Brind)   |
|  | nt and successor agents to provide specimen signatures below.  r of attorney, you must complete the certification opposite the  |
| Specimen signatures of agent (and successors)  | I certify that the signature of my agent (and successors) are correct   |
| Agent: Franzisky B. Naughin  | Principal: 7mm (W)  |
| Successor:   | Principal:  |
| Successor:   | Principal:  |
| e undersigned, a notary public in and for the abov   | ve county and state, certifies that . Dall Ballin   |
| atore me in person and acknowledged signing and deli   | pscribed as principal to the fure roing power of attorney, appeared ivering the instrument as the freu and voluntary act of the principal fied to the correctness of the signature(e) of the agent(s)).  PROFESSIONAL |
| "OFFICIAL SEAL"  BARBARA A. JENSEN  Notary Public, State of Himois   | TITLE NET   |
| "OFFICIAL SEAL" BARBARA A. JENSEN Notary Public, State of Himois My Conversion Expires 12/02/00  | Notary Public  My commission expires: 12/02/00  |
| "OFFICIAL SEAL"  BARBARA A. JENSEN  Notary Public, State of Minois  My Contribusion Expires 12/02/00  The name and address of the person preparing the   | TITLE NET   |
| "()FFICIAL SEAL"  BARBARA A. JENSEN  Notary Public, State of Illinois  My Convolution Expires 12/02/00  (The name and address of the person preparing that any Interest In real estate.)  This document was prepared by: FRAN 2 15KA | Notary Public My commission expires: /2/02/00 orms outd be inserted if the agent will have power to convey  |