

POWER OF ATTORNEY:

ROLLING MEADOWS

Charles M. Jenkins



STATE OF ILLINOIS)
)
COUNTY OF C O O K)

I, Charles M. Jenkins, residing at 3743 S. Wallace, Chicago, IL 60609, have made, constituted and appointed and, by these presents do make, constitute and appoint my wife, Jacqueline D. Jenkins, residing at 3743 S. Wallace, Chicago, IL 60609, as my true and lawful attorney for me and in my name, place and stead, to have the power of sale, purchase, acquisition, mortgage, management, disposition and/or control of all my interest in and to the property herein described. Further, I do make, constitute and appoint my other daughter, Jacqueline M. Gibbon, residing at 3638 S. Normal, Chicago, IL 60609, my true and lawful attorney in the absence or substitution of Jacqueline D. Jenkins, and in my name, place and stead, to have the power of sale, purchase, acquisition, mortgage, management, disposition and/or control of all my interest in and to the property herein described, and confer upon said attorneys the authority under applicable law, in Illinois and elsewhere, to:

1. Receive confidential information; to prepare, sign and file tax return forms, both state and federal, and to at any time perform any and all other acts before the taxing authorities of any jurisdiction including specifically the execution of Internal Revenue Forms 2848 and 8821, Power of Attorney forms (or any successors forms thereto), and such other authorization forms as may be necessary to carry out the purposes of this delegation of authority.
2. Represent me in real property transactions.
3. Represent me in tangible personal property transactions.
4. Represent me in bond, share and commodity transactions excluding any authority to purchase puts, calls or commodities or to purchase any security on margin. This authority shall include the power to purchase United States Government obligations which are redeemable at par value in payment of estate taxes imposed by the United States Government.
5. Represent me in banking transactions.

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IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the County of Cook, Illinois, this _____ day of _____, 20__.

Clerk of Cook County, Illinois

Notary Public in and for the State of Illinois
My Commission Expires _____, 20__

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NOTARY PUBLIC IN AND FOR THE STATE OF ILLINOIS
My Commission Expires _____, 20__

6. Represent me in business operating transactions.
7. Represent me in insurance transactions, excluding the right to change the beneficiary of any policy insuring my life.
8. Represent me in beneficiary transactions.
9. Represent me in gift transactions. My attorneys in fact shall not be authorized to make gifts to charities except in satisfaction of a written pledge signed by me. My attorneys in fact shall not be authorized to make gifts to a person not a descendant of mine or beneficiary under my Last Will and Testament or a Trust that I have signed or the spouse of such descendant or beneficiary.
10. Represent me in fiduciary transactions.
11. Represent me with respect to claims and litigations.
12. Represent me with respect to family maintenance.
13. Represent me with respect to benefits from military service.
14. Represent me with respect to records, reports and statements.
15. Represent me with respect to estate transactions and estate planning.
16. Represent me with respect to health care, including the withholding or withdrawal health care in accordance with the applicable law and other documents executed by me; and to authorize or consent to any health or medical care, or to the withholding thereof, if I am unable so to authorize or consent in addition to any authorization, direction or powers contained in any health care representative appointment (commonly known as "DNR" authority) that I have signed, and not in derogation or limitation of the terms of any such health care representative appointment, each of which is hereby incorporated in this Power of Attorney as if set forth in full herein.
17. Delegate in writing all or any of the authority granted herein.
18. And have general authority with respect to all matters, to perform any and all acts and execute any all documents not herein excluded the same as I might do if then present and competent.

If there are in effect any other applicable Statutory Fiduciary Powers, those powers shall be granted to my attorneys-in-

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Faint text, possibly a date or reference number.

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Faint, illegible text in the lower middle section.

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Faint text at the bottom right, possibly a signature or date.

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fact herein in addition to, not in limitation of, the powers granted above. I hereby ratify and confirm all that my said attorneys in fact or agents shall do by virtue hereof.

OTHER AUTHORITY

A. All powers of attorney not applicable to a specific property interest owned by me and identified in any power of attorney executed by me prior to the date of this power of attorney are revoked. This Power of Attorney supersedes all powers of attorney not revoked.

B. This Power of Attorney shall be binding on my guardian and my heirs, executors and administrators and shall remain in force only by order of a court of competent jurisdiction or by said attorney, which order or notice of termination also shall be served on the other party and recorded in the case of termination by both of my attorneys.

C. If recorded, this Power of Attorney may be terminated only by order of a court of competent jurisdiction or by both said attorneys, which order or notice of termination also shall be served on the other party and recorded in the case of termination by both of my attorneys.

D. This Power of Attorney shall not be revoked or terminated as to my attorneys-in-fact who, without actual knowledge of the death of the principal, acts in good faith under the Power of Attorney. Any action so taken, unless otherwise invalid or unenforceable, shall bind me and my heirs, devisees and personal representatives.

CONSERVATOR/GUARDIAN

If a protective proceedings is commenced, or a conservator or guardian of my estate, or guardian of my person is appointed, I hereby nominate my attorneys in fact, or either of them, to act in said capacity. I direct that bond be waived for the guardian of my person and of my estate so appointed.

INCAPACITY

This Power of Attorney shall not be affected by my subsequent disability or incapacity, and shall not be invalidated by the passage of time.

EXPENSES

My attorney in fact may be reimbursed for expenses but shall not be entitled to a fee for services provided.

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SUCCESSOR ATTORNEY IN FACT

I authorize my attorneys-in-fact to nominate a successor attorney and to delegate in writing their authority hereunder; and a guardian of my person and of my estate.

DUPLICATE

An executed duplicate of this Power of Attorney delivered by me or by said attorney to any third party will be conclusive to such third party that this Power of Attorney has not been terminated and will continue in effect until such third party is advised by written notice from me or from such attorney of such termination. My attorneys shall keep a record of all such third parties and shall advise them in writing upon its termination.

LAW

This Power of Attorney shall be governed by the state law in which I reside or die but shall also be enforceable to the full extent permitted by the Law of any other State of the United States of America, and of any other country or nation.

RATIFICATION

I hereby ratify, acknowledge and confirm all that any of my said attorneys may have done or may in the future do on my behalf under any previously dated power of attorney including without limitation any estate planning and implementation thereof.

IN WITNESS WHEREOF, I have freely and voluntarily signed and sealed this Power of Attorney this 6 day of October 1996. Signed, sealed and acknowledged in the presence of us and each other as witnesses:

Signed: Charles M. Jenkins
Charles M. Jenkins

Michael A. Jaminsky
Witness

Marie T. Jaminsky
Witness

Frank S. Jaminsky
Witness

Signed and sworn before me this 6 day of October 1996.

ANA M. AUDIFFRED
Notary Public

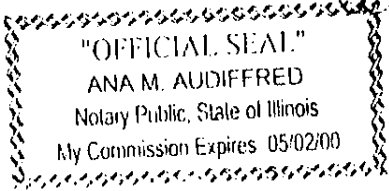


Exhibit A

LEGAL DESCRIPTION

Lot Forty (40) in Block Eleven (11) in Parkside being a subdivision of the Northeast Quarter (¼) (Except the South 330 feet of the West 330 feet thereof) of Section 30, Township 36 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.

PARCEL ID # 28-30-20-056

28-30-200-056

6562 W. 171st St.

Tinley Park, Ill 60477

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