

REQUEST FOR VACATION OF IN REM JUDGMENT

FOLLOW THE INSTRUCTIONS LISTED BELOW:

1. Type or print firmly with ball point pen.
2. Use separate form for each property.
3. Check the copy of the attached ordinance for guidelines and eligibility. No written request to proceed under the ordinance may be submitted for consideration to the Common Council where more than 45 days has elapsed from the date of entry of the in rem judgment to the date of receipt of the request by the City Clerk.
4. **Administrative costs totaling \$1370.00 must be paid by Cashiers Check to the City Treasurer's Office prior to acceptance of this application.**
5. Complete boxes a, b, c, d, and e.
6. Forward completed application to City Treasurer, 200 East Wells Street, Room 103, Milwaukee, WI 53202.

APPLICANT INFORMATION:

A. PROPERTY ADDRESS	2532 W Locust		
TAX KEY NUMBER	310-9988-X		
NAME OF APPLICANT	Anna L Yeager		
MAILING ADDRESS	2532 W Locust St		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER
Milwaukee	WI	53206	873-1871

MILWAUKEE CITY TREASURER'S OFFICE RECEIVED ON 2002 AUG 14 P 3:00

B. FORMER OWNER YES _____ NO

If no, describe interest in this property *This home belonged to my Auntie I came to live with her when she came ill. She has no one else. She is at Lake Wood running home every thing she has is there in that home and more.*

C. LIST ALL OTHER REAL PROPERTY IN THE CITY OF MILWAUKEE THAT THE FORMER OWNER HAS AN OWNERSHIP INTEREST IN (If not applicable, write NONE).

None

(Use reverse side, if additional space is needed)

D. HAVE MONIES FOR ADMINISTRATIVE COSTS BEEN DEPOSITED WITH THE CITY TREASURER'S OFFICE? (Documentation must be attached)	E. DEPT OF NEIGHBORHOOD SERVICES FILING: Have applications to record the subject property and any other unrecorded properties in which the former owner has an ownership interest been filed with the Department of Neighborhood Services per s. 200-51.5?
YES <input checked="" type="checkbox"/> NO _____	YES <input checked="" type="checkbox"/> NO _____

Applicant warrants and represents that all of the information provided herein is true and correct and agrees that if title to the property is restored to the former owner, applicant will indemnify and hold City harmless from and against any cost or expense which may be asserted against City as a result of its being in the chain of title to the property. Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid.

APPLICANT'S SIGNATURE *Anna L. Yeager* DATE *8-2-2002*

THE BACK OF THIS DOCUMENT CONTAINS A REFLECTIVE SECURITY MARK • HOLD AT AN ANGLE TO VIEW

TOP NATIONAL BANK

TOP National Bank
500 West Brown Deer Road
Brown Deer, WI 53221-5896

002993141
Official Check # 002993141
Serial # 10948220

OFFICIAL CHECK

THE FRONT NUMBER OF THIS CHECK IS 002993141. THE FRONT NUMBER OF THE ACCOUNT NUMBER IS 10948220. THE FRONT NUMBER OF THE ACCOUNT NUMBER IS 10948220. THE FRONT NUMBER OF THE ACCOUNT NUMBER IS 10948220.

MEMO TO THE CREDIT OF

RE: ANNA YERGER

MEMO

⑆022000888⑆⑆88⑆091001 002993141

**DURABLE POWER OF ATTORNEY FOR
FINANCIAL MANAGEMENT**

Instrument made this ^{29th C.B.} ~~X~~th day of May, 2000.

I, Carrie Corder-Buchanan, of 2532 W. Locust, Milwaukee, WI whose date of birth is December 10, 1916, hereby designate my niece, Anna L. Yeager, whose date of birth is November 11, 1923, as my true and lawful agent for the purpose of making financial decisions on my behalf.

I hereby revoke all prior Durable Powers of Attorney for Financial Management Powers of Attorney, if any.

GENERAL STATEMENT OF AUTHORITY GRANTED

I grant my agent the full power and authority to act for me in all matters as fully as I might or could do if personally present. Without limitation by enumeration, my agent shall have the power and authority to do any or all of the following for me:

1. Accounts. To establish accounts of all kinds, including checking and savings, with financial institutions of any kind, including but not limited to banks, savings and loans, credit unions and other similar institutions; to make deposits to and write checks on or make withdrawals from all my accounts; to negotiate, endorse or transfer any checks or other instruments which are made payable to me;

2. Safe Deposit Boxes. To contract with any institution for the maintenance of a safe deposit box in my name; to have access to all my safe deposit boxes;

3. Sell and Buy Power. To purchase, sell, mortgage, option, or lease any kind of property that I may own now or acquire in the future, whether real, personal, or intangible, upon such terms and conditions and security as my agent shall deem appropriate;

4. Manage. To manage my real estate;

5. Brokerage Accounts. To establish, utilize and terminate brokerage accounts; to exercise any voting or other rights or warrants with respect to securities, in person or by proxy; to register securities in my name or in the name of any broker or any nominee;

6. Borrow. To borrow money for me and to provide security using any of my real property or tangible or intangible personal property;

7. Insurance. To obtain insurance of any kind on my life or my property, to exercise options with respect to insurance policies and to make claims on insurance;

8. Litigation. To commence, defend, settle, arbitrate and enforce any right in any legal and administrative proceedings and to waive notice thereof;

9. Recording. To record this instrument and to attach any legal description hereto;

10. Revocable Trusts. To create a revocable trust agreement with such trustee(s) as my agent shall select, provided that (a) such trust agreement provides that all income and principal is paid to me or for my benefit in such amounts as I or my agent shall request or as the trustee(s) shall determine, (b) that on my death any remaining income and principal shall be paid to my estate, and (c) that the trust may be revoked or amended by me or my agent at any time, provided, however, that any amendment by my agent could have been included in the original trust agreement; to deliver and convey any or all of my assets to such revocable trust; to add any or all of my assets to such a trust already in existence at the time of the creation of this instrument or created by me at any time thereafter;

11. Tax Matters. To prepare, sign, and file federal, state, and/or local income, gift and other tax returns of all kinds, including, where appropriate, income tax returns, gift tax returns, claims for refunds, requests for extensions of time to file returns and/or pay taxes, extensions and waivers of applicable periods of limitation, protests and petitions to administrative agencies or courts, including all federal and state courts, regarding tax matters, and any and all other tax related documents; to receive confidential information; to receive and endorse refund checks; to consent to split gifts; to pay taxes due; and to exercise any elections I may have under federal, state or local tax law;

12. Disclaimer. To disclaim, either in whole or in part any interest in property I may be entitled to receive as a result of probate or nonprobate dispositions or lifetime transfers;

13. Government Benefits. To prepare, sign and file any claim or application for Social Security, Medicare, Title 19, SSI or similar federal, state or local governmental benefits and to represent me in all respects before such governmental organizations; to sue for, settle or abandon any claims to any benefits under any federal, state, or local statutes or regulations;

14. Funeral Arrangements. To make arrangements for my funeral and burial and/or cremation, including the purchase of a burial plot and marker, and such other related arrangements as my agent shall deem appropriate, if I have not done so previously;

15. Attorneys, Accountants and Advisors. To engage, compensate and discharge attorneys, accountants and other tax and financial advisors to represent me in connection with any financial matter including, without limitation, any matters involving taxes or governmental benefits to which I may be entitled;

16. Power of Substitution. If I have not designated an alternate or my alternate agent is unwilling or unable to serve, to designate another person as my agent with all the powers to act as though originally appointed under this instrument. The selection of such person shall be in the sole discretion of my agent, and the agent's decision hereunder shall be binding on all interested persons.

LIMITATIONS ON POWER OF AGENT

Except as provided in the Power to Make Gifts, my agent shall not exercise this power in favor of my agent, the agent's estate, the agent's creditors, or the creditors of the agent's estate.

POWER TO MAKE GIFTS

My agent may make gifts or other transfers without consideration, including the forgiveness of indebtedness to such person(s) and organizations(s) as my agent shall select.

REVOCAION OF POWER OF ATTORNEY

I may revoke this Durable Power of Attorney for Financial Management by a writing signed and dated by me.

PRESUMPTIONS REGARDING THIS INSTRUMENT

In the absence of actual notice to the contrary, any person, organization, corporation, or other entity who deals with my Agent shall presume that I validly executed this instrument and that this instrument is in full force and effect.

RELEASE OF THIRD PARTIES

In the absence of actual notice that I have revoked this instrument, no person, organization, corporation, or other entity who deals with my agent shall incur any liability to me, my estate, my heirs, or my assigns for permitting or facilitating my

agent in the exercise of authority granted under this instrument, and I hereby release all such persons, organizations, corporations or other entities from any liability arising from their reliance on this instrument.

PHOTOCOPIES

I hereby authorize that photocopies of this instrument may be made, and that such photocopies shall have the same force and effect as the original.

EFFECTIVE DATE

This instrument shall become effective as of the date hereof, and it shall not be affected by my subsequent disability or incapacity.

Carrie Buchanan

Carrie Buchanan

Social Security Number 402-32-5305

STATE OF WISCONSIN)
)ss
COUNTY OF MILWAUKEE

Personally came before me this 14th day of May, 2000, the above-named, Carrie Buchanan, to me known to be the person who signed the foregoing instrument and acknowledged the same.

Charisse Kendricks
Charisse Kendricks
Notary Public, State of Wisconsin.
My Commission is permanent.

We certify that the foregoing instrument was on the date set forth above signed by Carrie Corder Buchanan, in the presence of us; and that at the Principal's request and in the Principal's presence, and in the presence of each other, we subscribed our names as attesting witnesses thereto.

Charisse Kendrick of N605 Highway 73#2
Columbus, WI 53925

Rose M Anglin of 4334 N 36 Street
Med WI 53216

This instrument was drafted by:

Charisse Kendrick
KENDRICKS LAW OFFICE
P.O. BOX 109
Columbus, WI 53925
(920) 623-5510

NOTE: The Internal Revenue Service, Social Security Administration, Wisconsin Department of Revenue, and other governmental agencies have specific rules and forms regarding Powers of Attorney. In implementing the authority set forth in this instrument, it may be necessary to sign additional forms furnished by those agencies.