STATE OF FULL AND FLAKE COUNTY FILED FLAKE COUNTY

2000 064728

2000 SEP -G PH 1: 28

MORRIS W. CARTER ECCORDER

A136-10

CLAIM OF LIEN

State of	Indiana					
County of	Lake	Septe SS.	ember 6 ,	2000	(year)	
Be	efore me, the u	indersigned Notary Pub.	lic, personally ap	pearedJo	hn & Lorrai	ne
Majer:	ik	_who duly sworn says	that he is (the lie (Delete One	. ,	e-agent of the lienc	r herein)
			(Delete Olle)		
		John & Loi				
			(Lienor's Na	me)11U 15		
whose addr	ess is	10010 4th			IN 46322	
		This Door	(Lienor's Add		orty of	
and that in a	accordance wit	This Docu				
		tne Lak	ke Count	y Kecor	der!	
			money			
lienor furni:	shed labor, s er	vices or materials consi		be specially fal	bricated materials s	eparately)
on the follo	wing describ <mark>ed</mark>	d real property in	Lake	County,	State of India	ina
		officiently for identificat				
			Oakwood Si fith, IN !			
owned by _	T	homas Majerik				
•		en thou.seven		nty-five	dollars (\$ 21,7	75.00
of which th	ere remains un	paid \$_11,775.00) WDIAN	A. unin an	d furnished the firs	of the items on
	May 1		- Cumin	LL STATE OF THE ST	June 8	
1998		ne lien is claimed by one	e) and the last of		that the lienor serv	ed his notice to
owner on _	Septe	mber 6		Corraine Method of Servi		<u>nd deliv</u> ered
			AKAA			
					•	Rev. 4/99
	If your state	requires 8 1/2" x 11" for	ms, cut off the bi	ottom of this na	ige at the dotted line	a .



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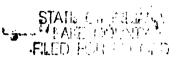
(Method of Service), and on t	the subcontractor on,
(year), by(Method of Service)	
(Method of Service)	
Farraine K. Majerik	J. M. Mayrik Lienon JOHN M. MAJERIK
Forraine K. Majerik LORRAINE K. MAJERIK	Lienon JOHN M. MAJERIK
·	
	ByAgent
. •	,
State of Indiana County of LARL On 9-4-00 before me, Sappeared LOVALINE + John	
County of LIKU.	Anna Deligit
appeared Lossaune + John	mazerick
personally known to me (or proved to me on the l	basis of satisfactory evidence) to be the person(s) whose nam
	owledged to me that he/she/they executed the same in his/her/t signature(s) on the instrument the person(s), or the entity u
behalf of which the persons) acted, executed the i	instrument.
WITNESS my hand and official scal	OFFICIAL!
Signature West States	ment is the property of
Signature of Notary	ment is the property of Affiant Known Produced The County Retype of ID DRIV LIC
ARIZED FOR THE SIGNATURES OF	(1) \$9.28.23-17.02 \(\sqrt{S}
N M. AND LORRAINE K. MAJERIK ONLY.	(1) 8928.23-1773 (S
	THE DER'S OF
	WDIANA CULT

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Official Stamp



2000 064728

2000 SEP -G PM 1: 28

MORRIS VI. CARTER FOORDER

Document Mail Back to Information Sheet

This is where you want the recorded document-sent-back-towhen it has completed the recording process.

Name	JOHN M. MAJERIK & LORRAINE MAJERIK
Address	10010 4th PL
City St Zip	HIGHLAND, IN 46322
Telepho <mark>ne</mark>	219-924-2038
Signature Printed	LORRAINE MAJERIK
Signature Written	Spraine Majirek,
Date of Signature	E CALADA S
Check Number	
Check Amount	CASh \$11.00

Office Use Only

Check Equals Amount Due	☐Yes ☐No
Total	
Initials	A.C.