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MARK W. CARTER  
RECORDER

LF136-04

### CLAIM OF LIEN

State of Indiana  
County of Lake

**Document is NOT OFFICIAL!**

**This Document is the property of the Lake County Recorder!**

Before me, the undersigned Notary Public, personally appeared MARTHA A. SMITH

who duly sworn says that he is (the lienor herein) (the agent of the lienor herein)

whose address is 635-165 N Hammond Ave #1024  
and that in accordance with a contract with The Estate of 635-165  
Lillian Jean Smith

lienor furnished labor, services or materials consisting of: (Describe specially fabricated materials separately)  
new addition, new carpet, new windows, new doors  
put down the floor

on the following described real property in  
State of Indiana County, Lake

(Describe real property sufficiently for identification, including street and number, if known)

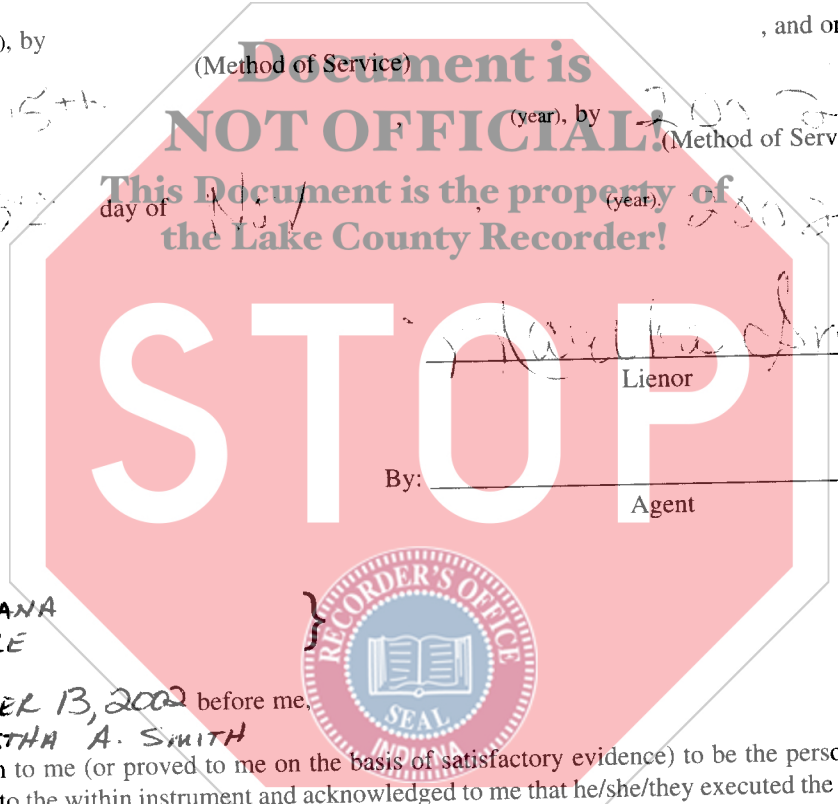
Legal Description  
P.T. 2 Y 3 E 2, W 2, S 1 T 34 R 10 42 N

*Handwritten initials/signature*

owned by Deanna & John - And the Estate  
of a total value of 92,000 Dollars  
(\$ 92,000) of which there remains unpaid \$ 92,000, and  
furnished the first of the items on Oct 15th (year) and the last of the  
items on March 10th, 2008 (year) and (if the lien is claimed by one not in  
privity with the owner) that the lienor served his notice to owner on  
2008 (year) by  
(Method of Service) Service by Attorney  
and, (if required) that the lienor served copies of the notice on the contractor on

(year), by  
(Method of Service) \_\_\_\_\_, and on the subcontractor  
on Oct 15th (year), by John  
(Method of Service) \_\_\_\_\_

Signed this 13th day of Nov, 2008  
This Document is the property of  
the Lake County Recorder!



Martha A. Smith  
Lienor  
By: \_\_\_\_\_  
Agent

State of INDIANA  
County of LAKE



On NOVEMBER 13, 2008 before me,  
appeared MARTHA A. SMITH  
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s)  
is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their  
authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon  
behalf of which the person(s) acted, executed the instrument.  
WITNESS my hand and official seal.

Signature [Signature]  
Signature of Notary

Affiant \_\_\_\_\_ Known \_\_\_\_\_ Produced ID   
Type of ID DW 8927071162  
(Seal)

MY COMMISSION EXPIRES:  
APRIL 26, 2010

↓  
Martha Smith  
PO Box 1401  
Hammond, Ind  
416325