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2002 105518

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2002 NOV 18 PM 4: 23

MORRIS W. CARTER RECORDER

LF136-04

## CLAIM OF LIEN

State of Indiana NOT OFFICIAL!

County of Lake

This Document is the property of

Before me, the undersigned Notary Public, personally appeared Christie Granger, Treas.

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

Pine Island Multi Dwelling Assoc

whose address is 4963 w 82nd Ct. Crown Point, IN 46307

and that in accordance with a contract with Mr. Robert McCants

lienor furnished labor, services or materials consisting of Describe specially fabricated materials separately)

Association Dues for June, July, August, September, October Wovember, Total \$440.00

Late Fees Totalling \$30.00

on the following described real property in lines \$30.00

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

4975 SW 82nd Ct. Crown Point, Indiana 46307

11.00

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 $\ \, \mathbb{O}$  1992-2001 E-Z Legal Forms, Inc.

Rev. 07/01 substitute for legal

owned by Mr. Robert McCants
of a total value of Six hungs of the control of total value of Six hungs of the control of total value of Six hungs of the control of total value of Six hungs of the control of total value of Six hungs of the control of total value of Six hungs of the control of total value of Six hungs of the control of
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furnished the first of the items on $May 15,2002$ , (year) and the last of the
items on November 15, 2002 (year) and (if the lien is claimed by one not in
privity with the owner) that the lienor served his notice to owner on November 18,2002
(year) by (Method of Service)
and, (if required) that the lienor served copies of the notice on the contractor on
(year), by (Method of Service) ent is , and on the subcontractor
NOT OFFIC(year), by L. (Method of Service)
State of Indiana County of Lake  On November 18,02 before me, appeared (IRISTIC E. Granger appeared (IRISTIC E. Granger)  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 hard and official seal.  Signature  Signature of Notary  Affiant  Type of ID  Official Seal  SHELLEY A. MILLER  Resident of Lake County, IN
SEAL C Resident of Lake County, IN My commission expires May 3, 2008