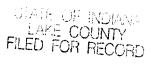
2004 041015



2004 MAY 18 PM 2: 68

MORRIS (1) REED RECORDED

LF136-04

CLAIM OF LIEN

Indiana! County of Jake

Before me, the undersigned Notary Public, personally appeared Milline - Sauger who duly sworn says that he is (the lienor herein) (the agent of the lienor herein)
whose address is # / Country Club A
and that in accordance with a contract with Michael Contract of Kimberly A Sanden lienor furnished labor, services or materials consisting of: (Describe specially fabricated materials separately)

(1) 45 000 1 forty first thousand note promising to Property back this many which was given to them to the death bruld their home of a trivoce occurs or when the death on the following described real property in

Lake County, State of Indiana (Describe real property sufficiently for identification, including street and number, if known)

13 2 40 Fram Medar Jaker. Fract Plat H. M.

Ligal Sescription Coolar Julies all S. 16 Bills 5

Bartletts actal Goodan Julies all S. 16 Bills 5

Property number 30-24-0030-0016

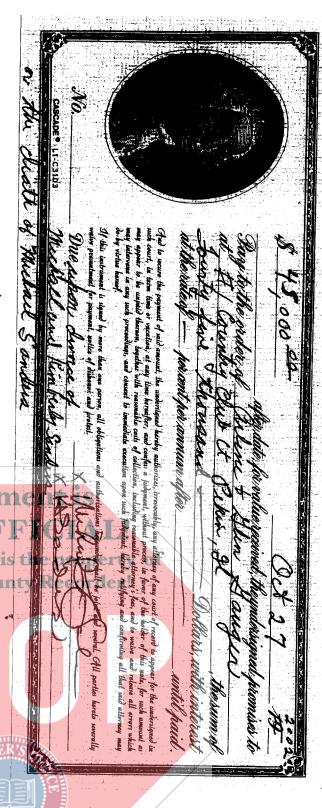
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			3
owned by Michael of of a total value of Frank (\$ 45,000 or) of which to furnished the first of the items on	Sandere and	Remberly A	Sanders
owned by	1 . 71	11 (45 00)	
of a total value of Fourt	y tark altourance	× (47,000 - 1	Dollars
(\$ 45,000°) of which t	here remains unpaid \$ 45,0	0000	, and
furnished the first of the items on	October 27, 2007	L building new and	the last of the
items on Delaber 27, 20t	A Completion of, ha	me and (if the lien is claimed	by one not in
privity with the owner) that the liend		may	
2004 by Certified		<i><</i> ₹/	
and, (if required) that the lienor serv	red copies of the notice on the con	tractor on	,
20 , by	(Method of Service)	, and on the subcontra	ctor
on	, 20 , by		
ic XM		(Method of Service)	
Signed this 18^{-100} day of	May ,20 d	4.	
	Document	Ven & Sang	41
N	OT OFFICE	A Lienor	
This 1	Document is the pro	perty of	
th	e Lake County Reco	ordeAgent	
State of In County of Xx fre			
County of Scribe. On Macy 18, 2004 b	efore me,		
appeared personally known to me (or proved to	o me on the basis of satisfactors.	avidance) to be the reserve.	,
is/are subscribed to the within instrum	nent and acknowledged to me that I	he/she/they executed the same in	n his/her/their
authorized capacity(ies), and that by behalf of which the person(s) acted, e	his/her/their signature(s) on the	instrument the person(s), or th	e entity upon
WITNESS my hand and official seal.			
Signature Silker MC	Hoshaw		
Signature of Notary	PEAL WOUND STREET	AffiantKnown	_Produced ID
ESTHER M. HOSHAW Notary Public		Type of ID	(Seal)
SEAL			,,
State of Indiana My Commission Expires 05/21/2009	{		



This Document is t the Lake Coun