STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2006 009764

2006 FEB -7 AM 11: 28

MICHAEL A. BROWN

A136-10	CLAIM OF LIEN	
State of Indiana County of Lake	Feb. 6, 2006 (year) ss.	
Before me, the undersig	ened Notary Public, personally appeared Thomas Broevies	
who d	fully sworn says that he is (the lienor herein) (the agent of the lienor herein) (Delete One)	
United Services	S. DKI-adivision of U.S. Contractors, T	٥
whose address is 500 Eas	100	
and that in accordance with a con	the Lake County Recorder!	
lienor furnished labor, services or	r materials consisting of: (Describe specially fabricated materials separately)	
on the following described real property sufficiently # 18 - 28 - 3	ly for identification, including street and number, if known) 224 - 18045 + arrison Aue, Munster, IN 000000000000000000000000000000000000	463
owned by of a total value of of which there remains unpaid \$	housand Onehundred Seventydollars (\$ 20,173.50) Three and 501100 and furnished the first of the items on	
November 7	and furnished the first of the items on $\frac{205}{\text{(year)}}$ and the last of the items on $\frac{205}{\text{(year)}}$	
(year) and (if the lien is	s claimed by one not in privity with the owner) that the lienor served his notice to	
		} <b>.</b>
	(Method of Service)	13
	<b>9</b>	71 <i>b</i>
	AKAA .	116

by	(Method of Service)					
	_ (year), by					
	(Method of Serv	ice)	<u></u> ,			
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State of	INDIANA . 1					
C	- · · · -					
On F	of LARE ebruary 6, 2006 before d Thornas Broenses	me, Kelly	Henderson			,
appeare	d <i>Thorna</i> 5 BroeAJES lly known to me (or proved to me	on the bosic o	of catiafactors as	ridanas) to be th	e nercon(n) who	aa nama(a)
	bscribed to the within instrument a					
	ed capacity(ies), and that by his/					
	eu capacity (168), and mat by 1118/.	ner/men signa	core(a) on me n			
	of which the person(s) acted, execu					
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Prescribed by the State Board of Accounts (2005) County form 170

## Declaration

## Document is

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury:

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Signature of Declarant

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