7.

STATE OF INDIANAL LAKE COUNTY FILED FOR RECORD

2006 024377.

2006 MAR 24 AM 11: 45

RECORDING OF SEWER LIEN

FOR A VALUABLE CONSIDERATION, THE RECEIPT WHEREOF IS HEREBY ACKNOWLEDGED, A CERTAIN SEWAGE LIEN EXISTING IN FAVOR OF THE GARY SANITARY DISTRICT, 3600 WEST THIRD AVENUE, GARY, INDIANA 46406, AND AGAINST WEATHERSBY, JAMES E. & KINSHARELLA, 1056 NOBLE STREET, GARY, IN 46404

The results with the results of the	
ON THE FOLLOWING REAL ESTATE TO-WIT:	
AMOUNT:	\$ 407.72
KEY NUMBER: 2	25-43-0195-0022
LEGAL DESCRIPTION:	GARY HOME & INV. CO'S 1 ST SUB. ALL L.19 BL.7
COMMON ADDRESS: A WRITTEN NOTICE OF AN INTO OF LAKE COUNTY, STATE OF IN	1056 NOBLE STREET UMENT IS ENTION TO HOLD LIEN WHICH IS TO BE FILED IN THE OFFICE OF THE RECORDER NDIANA.
SIGNED: PREPARED BY: TITLE:	The Deputy of the property of
DATE: STATE OF INDIANA)	eleverally 24, 2006
) SS: COUNTY OF LAKE)	
BEFORE ME THE UNDERSIGNED, A NOTARY PUBLIC FOR LAKE COUNTY, PERSONALLY APPEARED GAY M. LOWERY AND BEFORE ME ACKNOWLEDGED THE EXECUTION OF THIS INSTRUMENT THE DAY OF NOTARY SIGNATURE: DAY M. Drown	



#11

CAV

Prescribed by the State Board of Accounts (2005)

County form 170

Declaration

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; unty Recorder!

- 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

GAY M. LOWERY

Printed Name of Declarant