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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 024851

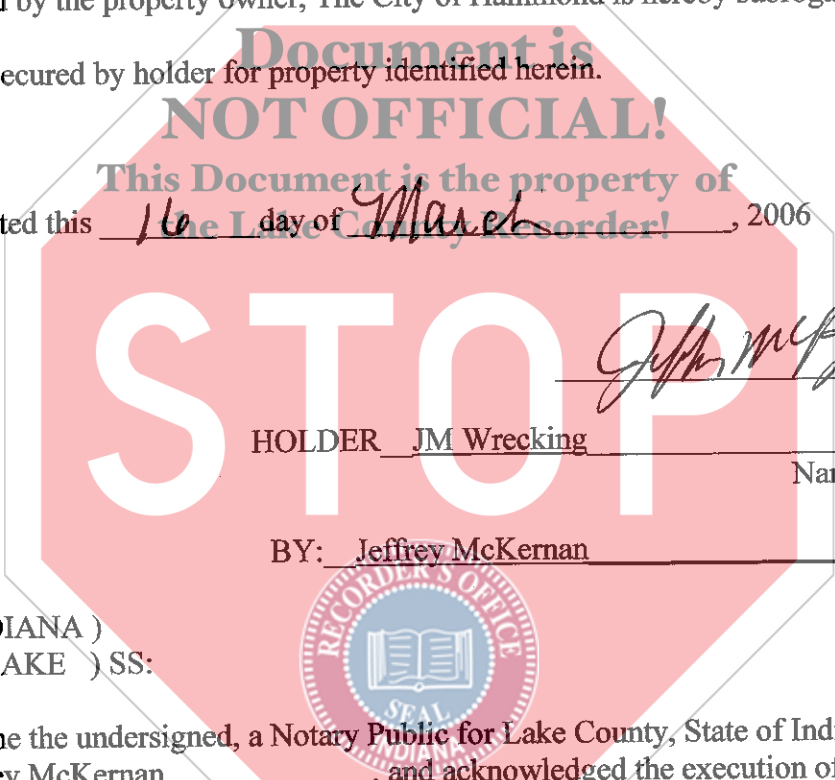
2006 MAR 27 AM 11:46

MICHAEL A. BROWN
RECORDER

ASSIGNMENT OF LEIN

Comes now JM WRECKING, holder of Mechanics Lien,
dated 3/16/06 Recorded on _____ Number 2006 024850,
for property located at 1422 Sherman St, City of Hammond, County of Lake, State of Indiana
Hereby assigns all rights, title and interest which holder has in said lien to the City of Hammond,
by virtue of this assignment holder warrants that the rights ,title and interest holder has in said
Mechanics Lien have not been assigned to any other individual or entity and that said lien has
not been satisfied by the property owner, The City of Hammond is hereby subrogated to all
rights and liens secured by holder for property identified herein.

So executed this 16 day of March, 2006



Jeffrey McKernan
Signature

HOLDER JM Wrecking
Name of Company

BY: Jeffrey McKernan
Name

STATE OF INDIANA)
COUNTY OF LAKE) SS:

Before me the undersigned, a Notary Public for Lake County, State of Indiana, personally
appeared Jeffrey McKernan, and acknowledged the execution of this
instrument this 16th day of March, 2006

Signature: James B. [Signature]
Notary Public
My commission expires 12/29/10

Residence: Lake County, Indiana

\$12
CS
CM

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 hereby 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.



James Callahan
Signature of Declarant

JAMES CALLAHAN
Printed Name of Declarant