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2008 053022

LF136-04

CLAIM OF LIEN

State of INDIANA

County of LAKE

SS.

SEPT . 08 (year) 2008

Before me, the undersigned Notary Public, personally appeared LINDA SYKORA
~~FINALIAL SECRETARY~~ who duly sworn says that he is (the lienor herein) (the agent of the lienor herein)
(Delete One)

P.O. BOX 69 CEDAR LAKE INDIANA
LAKE SHORE SUBDIVISION (Lienor's Name) (3709 W 139TH AVE. LOCATION OF WELL)
whose address is P.O. BOX 69 CEDAR LAKE IN 46303
(Lienor's Address)

and that in accordance with a contract with WAYNE STRYJEWSKI & (ANI) SANDRA MOCHESKI
8712 W 139TH PL CEDAR LAKE IN 46303-9211

lienor furnished labor, services or materials consisting of: (Describe specially fabricated materials separately)
DUES + ASSESSMENTS

on the following described real property in LAKE County,
State of INDIANA

(Describe real property sufficiently for identification, including street and number, if known)
8712 W. 139TH PL CEDAR LAKE IN 46303-9211
BLOCK (1) LOTS (5) + (6)
TOWNSHIP (34) (HANOVER TOWNSHIP)
LAKE SHORE SUBDIVISION ADD:
LAKE COUNTY, STATE OF INDIANA

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owned by WAYNE STRYJEWSKI & SANDRA MUCHESKI
of a total value of THREE HUNDRED DOLLARS Dollars
(\$ 300.00) of which there remains unpaid \$ 300.00, and
furnished the first of the items on JULY 1 2008 to JULY 1 2009 (year) and the last of the
items on JULY 1 2008 to JULY 1 2009 (year) and (if the lien is claimed by one not in
privity with the owner) that the lienor served his notice to owner on MAY 15 2008
(year) by MAIL
(Method of Service)

and, (if required) that the lienor served copies of the notice on the contractor on N/A
N/A (year), by N/A
(Method of Service), and on the subcontractor
on N/A (year), by N/A
(Method of Service)

LAKE SHORE SUBDIVISION INC.
Document is Lienor
NOT ORIGINAL ASSOCIATION (INC)
P.O. BOX 9 CEDAR LAKE IN
By Linda Sykora
Agent
This Document is the property of
the Lake County Recorder!
SECRETARY

State of Indiana
County of Lake

On Sept 8, 2008 before me,
appeared Linda Sykora
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 hand and official seal.

Signature [Signature]
Signature of Notary



my commission expires
8-28-2014

Affiant Known Produced ID
Type of ID _____
(Seal)