

2.

2009 050062

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2009 JUL 20 PM 4:11

MICHAEL A. BROWN  
RECORDER

Recording requested by: \_\_\_\_\_

When recorded, mail to: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Space above reserved for use by Recorder's Office

Document prepared by:

Name Teresa Moreno

Address 4324 S. Hermitage ←

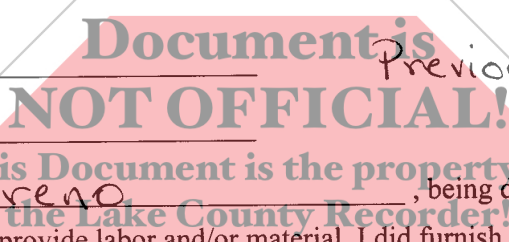
City/State/Zip Chicago, Ill. 60609

### Claim of Lien

State of Indiana

County of Lake

I, Teresa Moreno



Previous Claim lien #'s:  
2004 045576  
2004 032662

, being duly sworn, state the following:

In accordance with an agreement to provide labor and/or material, I did furnish the following labor and/or materials:  
Borrowed money to remodeled 551 Gastlin St in Hammond, IN 46327 for plumbing at such property, purchased bed for Sonia Moreno, disconnection/cancellation fees of 2 cell phones, two round trip tickets from Mexico to Chicago & final pay-off of Chase Bank credit card.  
on the following described real property located in Lake County,

State of Indiana, commonly known as:  
551 Gastlin St. Hammond, IN 46327

and legally described as:  
551 Gastlin St. Hammond IN, 46327  
Gastlin Add. 437 BL 1 - Parcel # 007-26-33-0171-0033

which property is owned by Sonia Moreno, whose address is 551 Gastlin

St. Hammond, IN 46327, of a total value of \$ 34,000.00, of which there

remains unpaid \$ 34,000.00, and I further state that I furnished the first of the items on the date of

February 23, 2000, and the last of the items on the date of February 22, 2003.

I hereby, under the laws of the State of Indiana, claim a lien against the above-described property in the amount of money, stated above, which remains unpaid to me.

170  
CS  
RM

Teresa Moreno.  
Signature of Person Claiming Lien

Previous Claim Lien#.  
2004 045576  
2004 032662

Teresa Moreno  
Name of Person Claiming Lien

Address of person claiming lien:  
4324 S. Hermitage  
Chicago, Ill. 60609

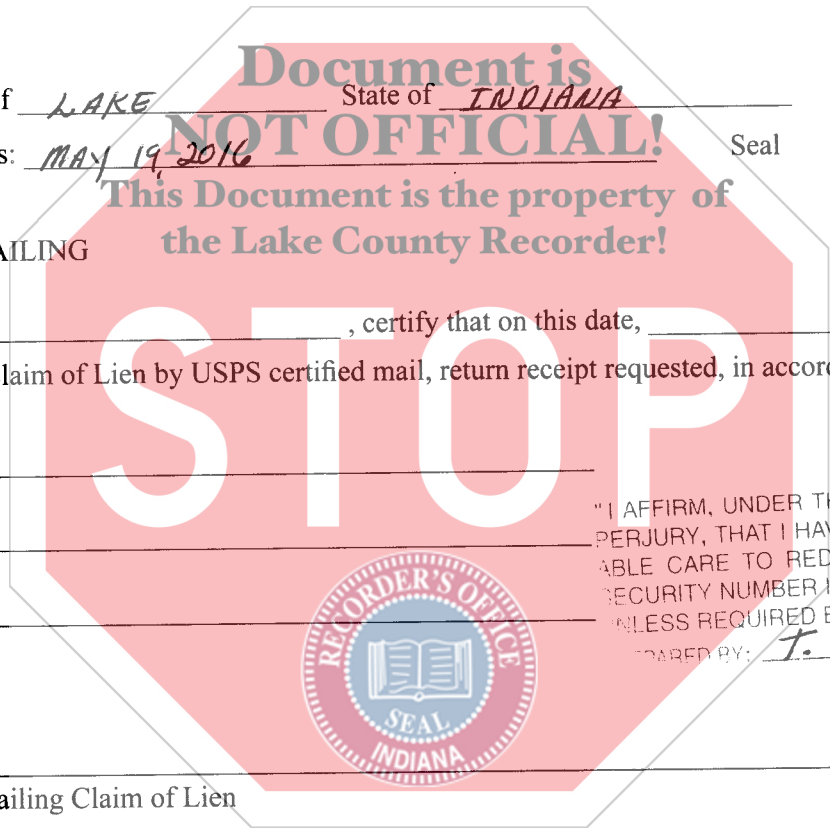
On JULY 20, 2009, TERESA MORENO came before me personally and, under oath, stated that he/she is the person described in the above document and that he/she signed the above document in my presence.

Barbara J. Bortoli  
Notary Signature

Notary Public,

In and for the County of LAKE State of INDIANA

My commission expires: MAY 19, 2016 Seal



CERTIFICATE OF MAILING

I, \_\_\_\_\_, certify that on this date, \_\_\_\_\_, I have mailed a copy of this Claim of Lien by USPS certified mail, return receipt requested, in accordance with the law, to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_

"I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASONABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW."  
PREPARED BY: T. M.

\_\_\_\_\_  
Signature of Person Mailing Claim of Lien

\_\_\_\_\_  
Name of Person Mailing Claim of Lien