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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 063957

2009 SEP 16 PM 12:49

MICHAEL A. BROWN
RECORDER

Recording requested by: Robert Chapman
When recorded, mail to:

Name: Robert Chapman
Address: 7013 Fillmore Dr.
City: Merrillville
State/Zip: In. 46410

Space above reserved for use by Recorder's Office

Document prepared by:
Name Robert Chapman
Address 7013 Fillmore Dr.
City/State/Zip Merrillville, In. 46410

Claim of Lien

State of Indiana

County of Lake

I, Robert Chapman, 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:

Repair of condo due to flood damage.

on the following described real property located in Lake County,
State of Indiana, commonly known as:

7003 Fillmore Dr. Merrillville, In. 46410

and legally described as: Building #4 Unit 1 Colonies
Merrillville Condominium Tax Key 08 15 0023
0235

which property is owned by Jeanette Minchuk, whose address is
7003 Fillmore Dr. Merrillville In. of a total value of \$ 770.00,
of which there remains unpaid \$ 770.00, and I further state that I furnished the first of
the items on the date of 7-2-09, and the last of the items on the date of
8-17-09.

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.

\$13
CS
CN



Signature of Person Claiming Lien

Robert Chapman

Name of Person Claiming Lien

Address of person claiming lien:

On September 18, 2009, ROBERT D. CHAPMAN 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.

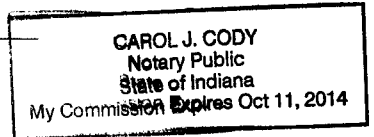
Carol J. Cody
Notary Signature

Notary Public,

In and for the County of LAKE State of INDIANA

My commission expires: OCTOBER 11, 2014

Seal



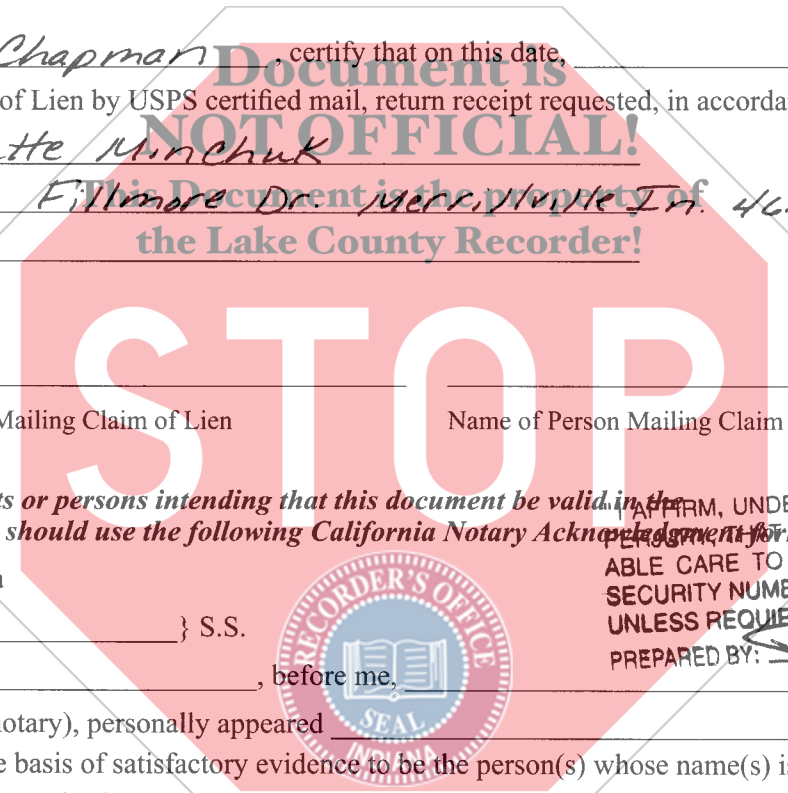
CERTIFICATE OF MAILING

I, Robert Chapman, 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: Jeanette Minchuk

Address: 7003 Fillmore Dr. Merrillville, IN 46410

Date: _____



Signature of Person Mailing Claim of Lien

Name of Person Mailing Claim of Lien

California residents or persons intending that this document be valid in the State of California should use the following California Notary Acknowledgment Form.

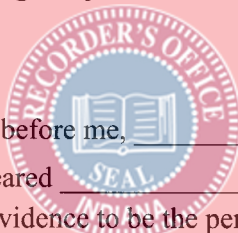
State of California

County of _____ } S.S.

On _____, before me,

(name and title of notary), personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the above instrument and acknowledged to me that they/he/she executed the instrument in their/his/her authorized capacity. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Witness my hand and official seal.

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: RC



Notary Signature

Seal