

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2009 080757

2009 DEC -4 AM 11:29

MICHAEL A. BROWN  
RECORDER

Recording requested by: Radosav Kljajic

When recorded mail to:

Name: Lurline Felder

Address: 317 East 43rd Avenue

City: Gary

State/Zip: Indiana 46409

Space above reserved for use by Recorder's Office

Document prepared by:

Name: Radosav Kljajic

Address: 4802 Orchard Drive

City/State/Zip: Griffith, Indiana 46319

### Claim of Lien

State of Indiana

County of Lake

I, Radosav Kljajic

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:

Insurance work, per contract

on the following described real property located in Lake County,

State of Indiana, commonly known as: 317 east 43rd Avenue  
Gary, Indiana 46409

and legally described as: KELLWOOD ADD. L.5 & L.6 BL.2

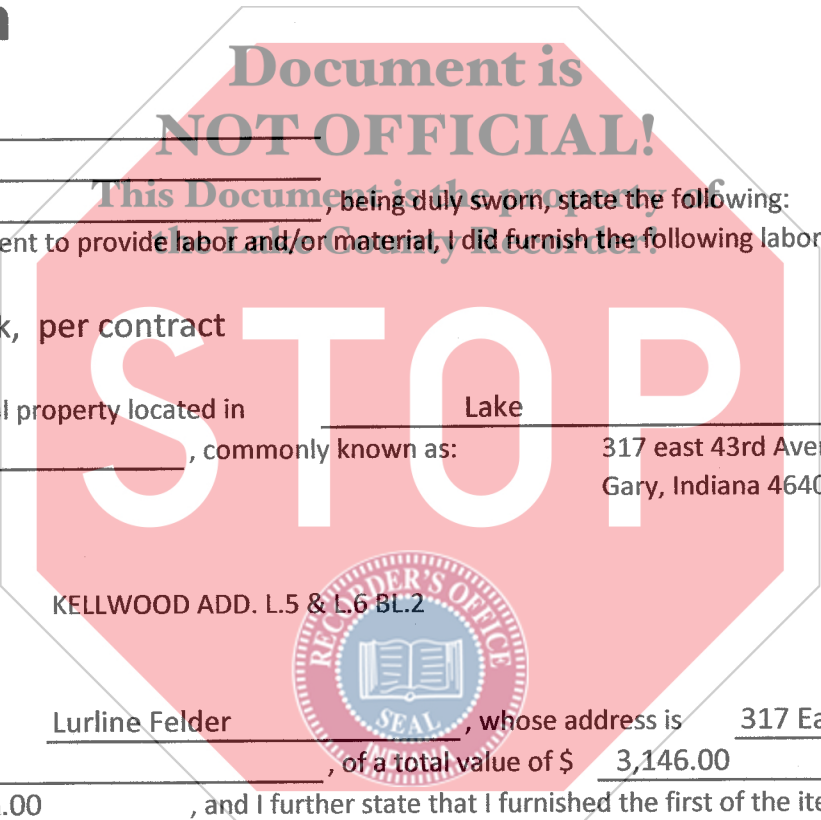
which property is owned by Lurline Felder, whose address is 317 East 43rd Avenue

Gary, Indiana 46409, of a total value of \$ 3,146.00, of which there

remains unpaid \$ 3,146.00, and I further state that I furnished the first of the items on the date of

August 11th 2009, and the last of the items on the date of December 3rd 2009.

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.



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AO  
CS

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Radosav Kljajic  
Signature of Person Claiming Lien

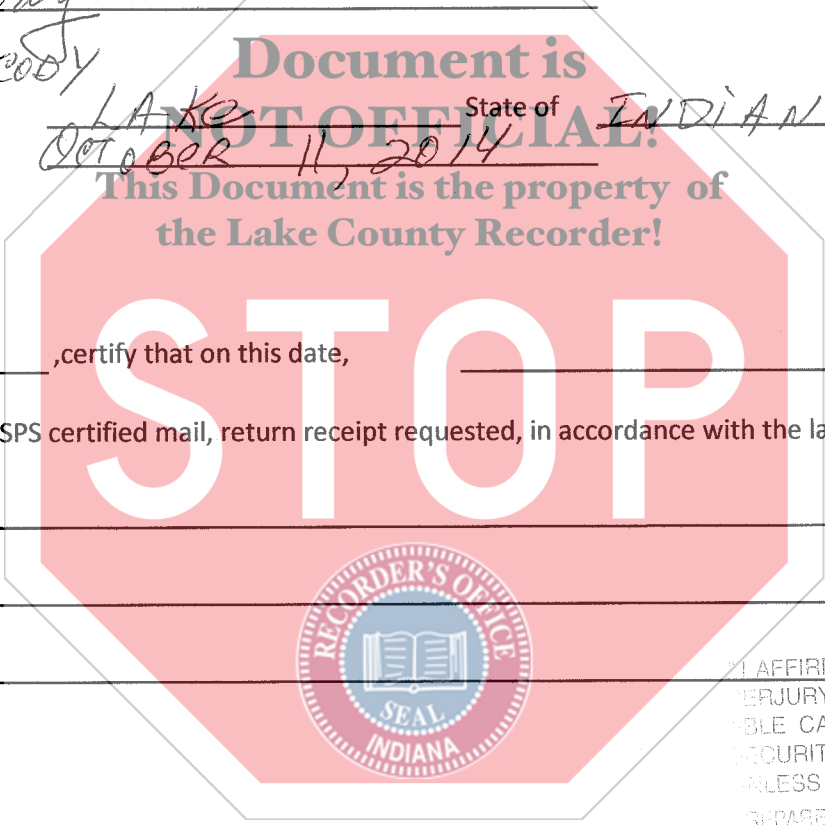
Radosav Kljajic  
Name of Person Claiming Lien

Address of Person Claiming Lien: 4802 Orchard Drive  
Griffith, Indiana 46319

On December 4, 2009 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 Public  
State of Indiana  
My Commission Expires Oct 11, 2014

Carol J. Cody  
Notary Signature  
Notary Public, CAROL J. CODY  
In and for the County of LAKE  
My commission expires: OCTOBER 11, 2014



Certificate of Mailing

I, \_\_\_\_\_, certify that on this date, \_\_\_\_\_, I have mailed a copy of this 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: RK

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