

FILED FOR RECORD

2011 042132

2011 AUG -4 PM 2:46

REC'D

RELEASE OF MECHANIC'S LIEN

This is to certify that a certain claim by Graham's Trucking & Excavating, Inc.

P.O. Box 70, Crown Point, IN 46308

against MD Construction, in connection with

which a Notice of Intention to Hold Mechanic's Lien was executed the 19th day of October

20 10, and recorded on the 19th day of October, 20 10.

2010 060782, in the office of the Recorder of Lake County,

(insert recording reference)

Indiana, has been fully paid and satisfied and said lien is hereby released this 4th day of August, 20 11.

Signature Sarah E. Wiese Signature _____

Printed Sarah E. Wiese Printed _____

(Individual Acknowledgment)

STATE OF INDIANA)

COUNTY OF _____)

Before me, a Notary Public in and for the State of Indiana and a resident of _____ County, Indiana,

personally appeared _____, who acknowledged execution of the foregoing Release of

Mechanic's Lien.

Witness my hand and Notarial Seal this _____ day of _____, 20 _____.

My commission expires: _____ (Signature) _____

_____, Notary Public (Printed) _____

(Organizational Acknowledgment)

STATE OF INDIANA)

COUNTY OF _____)

Before me, a Notary Public in and for the State of Indiana and a resident of Lake County, Indiana,

personally appeared Sarah E. Wiese the Agent of

Graham's Trucking & Excavating, Inc., a(n) agent who acknowledged execution

of the foregoing Release of Mechanic's Lien as such agent for and on behalf of

said company.

Witness by hand and Notarial Seal this 4th day of August, 20 11.

My commission expires 6/19/2014 Patricia G Shure (Signature) _____

Patricia G Shure (Printed) _____, Notary Public

"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."

Sarah E. Wiese (Signature)

Sarah E. Wiese (Printed)

This instrument was prepared by Sarah E. Wiese



Patricia G Shure
Notary Public - Seal State of Indiana
Lake County
My Commission Expires 06/19/2014

AMOUNT \$ 12.00
CASH CHARGE _____
CHECK # _____
OVERAGE _____
COPY _____
NON - COM _____
CLERK lyn