CERTIFICATION OF LIEN

FOR A VALUABLE CONSIDERATION, THE RECEIPT WHEREOF IS HEREBY ACKNOWLEDGED, A CERTAIN LIEN EXISTING IN FAVOR OF:

| TOWN OF SCHERERVILLE 10 E. JOLIET STREET SCHERERVILLE, IN 46375 | WEED/VEGETATION REMOVAL AND CUTTING SERVICES: RECORDING FEES: ADMINISTRATIVE COST: | \$108.26 \$ 43.00 \$150.00 |
|--|--|--|
| | TOTAL AMOUNT: | \$258.26 |
| 7 | YEAR: 2011 | 201 |
| AND AGAINST: Andy & Donna Caird 6937 Foxwood Dr. | | |
| Schererville, IN 46375 | | 0 |
| | | £2 |
| ON THE FOLLOWING REAL ESTATE TO WIT: | | 4222 |
| | | 0 |
| • • | 1-13-203- 007.000-036 3-0598-0039 | |
| LEGAL DESCRIPTION: Lot 457, Foxwood Est | ates, Unit 7, to the Town of Schererville, as recorded in Plat I | Pook 76 Page 60 in |
| the Office of the Recorder of Lake County, Indian | | Sook 76 Page 69, III |
| Commonly known as: 6937 Foxwoo | 4 D- | trouves 1 1 1 |
| Commonly known as. 6937 POXWOO | u Dr. | |
| I, Janice Malinowski, Clerk-Treasurer of swear or affirm under the penalties of perjury knowledge. | the Town of Schererville, Lake County, Indiana, a Municipal (that the above and foregoing representations are true and | Corporation Thereby to the best of my |
| This Do | oument is the property of | Management (Management (Manage |
| Town | of Schererville, Lake County, Indiana, a Municipal Corporation | 1 9 9 B |
| Date: 8-4-11 Signed: | anci M. malennisi | America) |
| | M. Malinowski -Treasurer | |
| State of Indiana) | | |
|) ss: | | |
| County of Lake) | | |
| Clerk-Treasurer of the Town of Schererville, Lak | Public in and for the State of Indiana, personally appeared Jar e County, Indiana, a Municipal Corporation, and, being first du | uly sworn upon her |
| oath, says that the facts alleged in the foregoing i | nstrument are true. Signed and sealed this 4th day | of August, 2011. |
| County of Residence: | Lard Gleach | #12 |
| My Commission expires: $9-21-2017$ | Notary Public, signature OAROL T. CLARK | CK 513 |
| | Notary Public, printed | -010 NA~ |
| l affirm, under the penalties of perium | that I have taken reasonable care to redact each Social Secu | with number in this |
| document unless required by law and this doc | some of the same o | THE THE THE THIS |

I affirm, under the penalties of perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law and this document was prepared by Attorneys David M. Austgen and Joseph C. Svetanoff, AUSTGEN KUIPER & ASSOCIATES, P.C., 130 N. Main Street, Crown Point, Indiana 46307.

A WRITTEN NOTICE OF A CERTIFICATION OF LIEN WHICH IS TO BE FILED IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, STATE OF INDIANA.