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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 071442

2015 OCT 21 AM 10:38

MICHAEL B. BROWN
RECORDER

Cross-reference Instrument Number: 2014-048141

RELEASE OF ASSESSMENT LIEN

Dated: October ____, 2015

LAKE HILLS MASTER HOMEOWNERS ASSOCIATION, INC. (hereinafter "Claimant"), whose address is 429 West Lincoln Highway, Schererville, Indiana 46375, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, hereby **RELEASES** the **ASSESSMENT LIEN** dated **August 8, 2014** and recorded on August 11, 2014, in the Office of the Recorder of Lake County, Indiana, as **Instrument No. 2014-048141**, including all covenant assessments for landscaping violations, late fees, interest and attorney fees, as of the date of lien filing, as to the following described real estate:

Property Owner: Douglas and Lora Meding

Legal Description: Lake Hills Resubdivision, Unit 2, Lot 1

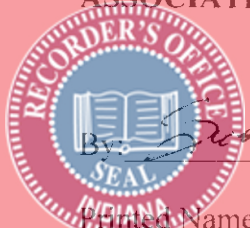
Parcel ID: 45-11-28-204-002.000-035

Commonly known as: 10390 Lakeside Court, St. John, Indiana 46373

The undersigned individual executing this instrument, having been duly sworn upon his oath, under the penalties of perjury hereby states that Claimant releases the assessment lien upon the above-described real estate and improvements thereon, and that the facts and matters set forth in the foregoing statement are true and correct.



LAKE HILLS MASTER HOMEOWNERS ASSOCIATION, INC.



Printed Name: Scott Spevack

Title: P. es. Secy

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#4307

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me the undersigned, a Notary Public in and for said County and State, personally appeared Scott Spavock, the President of Lake Hills Master Homeowners Association, Inc., who acknowledged the execution of the foregoing Release of Assessment Lien, and who, having been duly sworn, under the penalties for perjury, stated that the facts and matters therein set forth are true and correct.

WITNESS, my hand and Notarial Seal this 10th day of October, 2015.

My Commission Expires:

May 25, 2018

My County of Residence:

Lake

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Printed

STOP

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: Scott J. Fandre

This instrument was prepared by: Scott J. Fandre (#27681-71)

Krieg DeVault LLP
4101 Edison Lakes Parkway, Suite 100
Mishawaka, Indiana 46545
(574) 277-1200

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