2016 035904

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD 2016 JUN -9 PM 12: 36 MICHAEL B. BROWN RECORDER

Above Space Reserved for Recording [If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

## **Claim of Lien**

Date of this Document:	
Reference Number of Any Related Pocuments:	
Name Street Address City/State/Zip Name Street Address City/State/Zip	ulation/ zeations
Abbreviated Legal Description (i.e., lot, block plat, or section, township, range, quarter/quarter or unit, building and condo name):  1. 1509. 75 FF of Student Students of S	<u>-</u>
State of:	- 13.94 - 269
	J/V

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on the following described real property in	Lakecount	v. State of
Indi ANA		
ctreat and number).		
	2 Street	
Crown toint	IN 46301	······
Some Man I Gal	d %-0	owned
total value of wenty Nine Hundred Sixty	Elkatare 19 3 915 an latu	of a
remains unpaid wenty Nine Hundre & Sixty	Figure 16 2015 00	), and
furnished the first of the items on 4-12	3, 20 K and the last of th	e items on
4-13 20\\\ 20\\\\ and (if	the lien is claimed by one not in privity with the Owne	er) that the
lienor served his or her notice to Owner on	May 17	20 15.
by mail		
(method of service).		
Docu	ment is	
And, (if required) that the lienor served copies of the	notice on the contract on	
20 by Max	Method of serv	ice), and
on the subcontractor on (method of service) and (if known) on the lender, on	20 by	
(method of service) and (if known) on the lender, on	t is the property of	20
by the Lake Co	unty Recorder! method	of service).
	11	
Signed this day of	JUNE , 20 16.	
Lienor:		
DECAN GOOD	and Branch Manager	1
By (officer or Agent)	MO COMO IVONO SOFO	
State of: halana	and the same of th	
Countries	DERSO	
County of:		
On 6 Defore	me gallano	
appeared In Dension	personally known to me	or proved
to me on the basis of satisfactory evidence) to be the	person(s) whose name(s) is/are subscribed to the wit	hin
instrument and acknowledged to me that he/she/the	Verestice the same in his/her/their authorized capaci	ty(ies),
and that by his/her/their signature(s) on the instrume person(s) acted, executed the instrument.	ent the person(s), or the entity upon behalf of which th	Æ
personny acteur, executed the minument.	Contraction to the Contraction of the Contraction o	
WITNESS my hand and official seal (	CHRYSTIE MELVIN	
	SEAL \$	
The work of the second	Notary Public, State of Indiana	
Signature of Notary \	My Commission Expires January 12, 2023	
Affiant Known Produced ID		
Type of ID		
(Seal)		
(Jeul)		