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2017 044784

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 JUL 19 AM 11:39

MICHAEL B. BROWN
RECORDER

Recording requested by: _____
When recorded, mail to: _____

Name: William D. Lewis

Space above reserved for use by Recorder's Office

Address: 12125 White Oak Dr

Document prepared by:
Name William D. Lewis

City: Crown Point

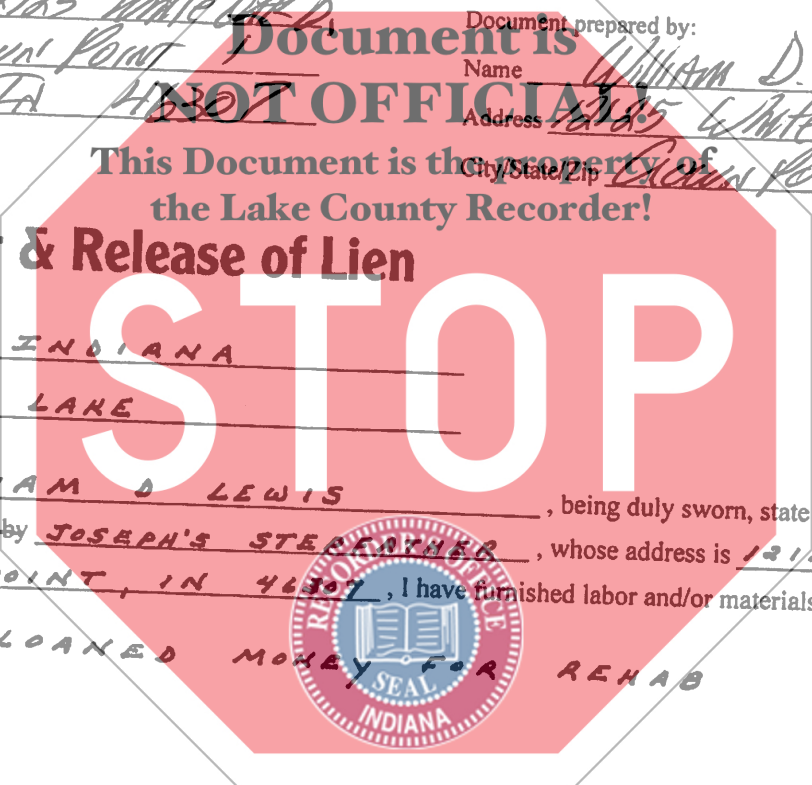
Address 12125 White Oak Dr

State/Zip: IN 46307

City/State/Zip Crown Point IN 46307

This Document is the property of
the Lake County Recorder!

Waiver & Release of Lien



State of INDIANA
County of LAKE

I, WILLIAM D LEWIS, being duly sworn, state the following:
I am employed by JOSEPH'S STEEPATHER, whose address is 12125 WHITE OAK DR
CROWN POINT, IN 46307, I have furnished labor and/or materials described as:

LOANED MONEY FOR REHAB

for work done at the address of 7620 W 140TH PLACE, CEDAR LAKE, IN
the legal property description of which is:
2007 064866 46303

and which is owned by JOSEPH K HERSEY, whose address is 7620 W 140TH PLACE
CEDAR LAKE, IN 46303, and I do hereby state I have been paid in
full for the above-mentioned labor and/or materials and I do unconditionally waive all liens or claims of
liens relating to this labor and/or materials that I have or had on the foregoing real property.

\$25.00
cash *AS*

William D Lewis
Signature of Person Waiving Lien

WILLIAM D LEWIS
Name of Person Waiving Lien

Address of person waiving lien:

12125 WHITE OAK DR
CROWN POINT, IN 46307

On JULY 18, 2017

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.

Kelly L. Cleveringa
Notary Signature

Notary Public,

In and for the County of Lake State of Indiana

My commission expires: May 1, 2024 Seal



California residents or persons intending that this document be valid in the State of California should use the following California Notary Acknowledgment form:

State of California

County of _____ } S.S.

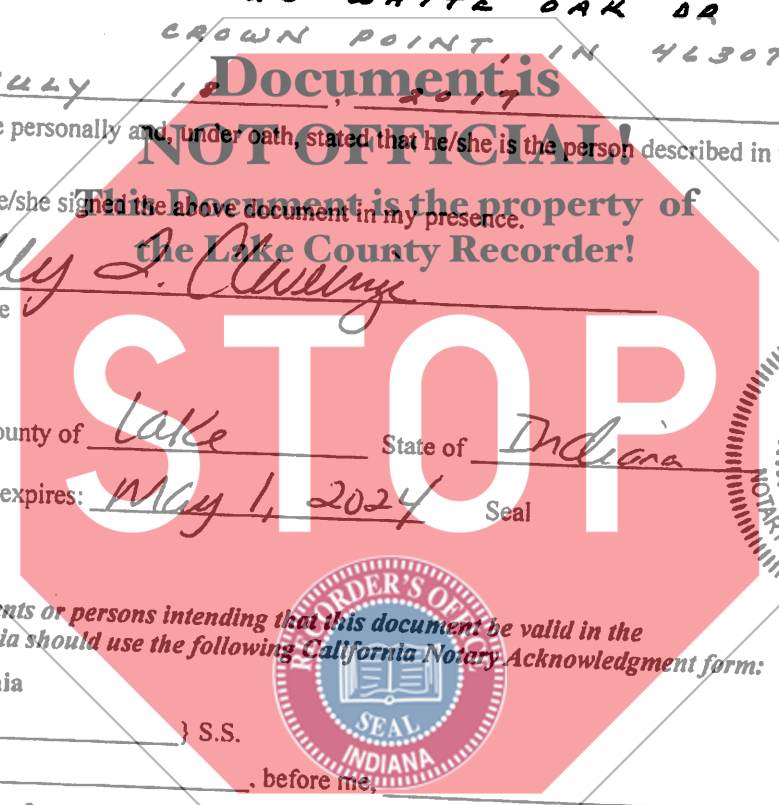
On _____, before me,

____ (name and title of notary), personally appeared _____, who

proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the above instrument and acknowledged to me that they/he/she executed the instrument in their/his/her authorized capacity. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Witness my hand and official seal.

Notary Signature

Seal



"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: [Signature]