

COOK COUNTY
RECORDER
EUGENE "GENE" MOORE
MARKHAM OFFICE



MECHANICAL

LF136-04

CLAIM OF LIEN

State of ILLINOIS
County of COOK SS. 11-27, 01 (year)

Before me, the undersigned Notary Public, personally appeared _____

_____ who duly sworn, says that he is (the lienor herein) ~~(the agent of the lienor herein)~~
(Delete One)

DANIEL L. BOYLE
(Lienor's Name)

whose address is PO Box 1432 WILLMARS MN 56201
(Lienor's Address)

and that in accordance with a contract with PATRICIA HERRICK

lienor furnished labor, services or materials consisting of: (Describe specially fabricated materials separately)

R&R ROOF, SUPPLIED SOME MATERIALS, LANDSCAPING,
TREE TRIMMING, PAINTING, FENCING, TRASH REMOVAL

on the following described real property in COOK County,

State of ILLINOIS:

(Describe real property sufficiently for identification, including street and number, if known)

18401 S. JOHN AVE COUNTRY CLUB HILLS, ILL 60478
PROPERTY INDEX # 31-03-107-007
LOT # 133 MERRIONS J E COUNTRY CLUB HILLS 2 ADD 03-35-13

Handwritten initials/signature

owned by PATRICIA HERRERA
of a total value of FIVE THOUSAND ONE HUNDRED & EIGHTY Dollars
(\$ 5,180-) of which there remains unpaid \$ 5,180-, and
furnished the first of the items on 8-27-01, (year) and the last of the
items on 9-08-01, (year) and (if the lien is claimed by one not in
privity with the owner) that the lienor served his notice to owner on 11-27-01,

(year) by _____
(Method of Service)

and, (if required) that the lienor served copies of the notice on the contractor on _____,
(year), by _____, and on the subcontractor
(Method of Service)

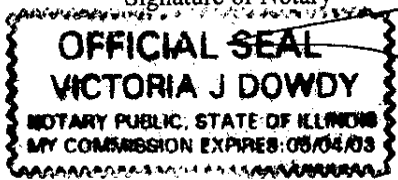
on _____, (year), by _____
(Method of Service)

[Signature]
Lienor
By _____
Agent

State of ILLINOIS
County of COOK }

On 11-27-2001, before me,
appeared DANIEL LEWIS BOYLE
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 within instrument and acknowledged to me that he/she/they executed the same in his/her/their
authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon
behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Signature [Signature]
Signature of Notary



Affiant Known Produced ID
Type of ID Minnesota Drivers License
B 400 135 515 303 (Seal)

DANIEL BOYLE
PO Box 1432
Willmar MN 55259