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ORIGINAL CONTRACTOR'S CLAIM FOR LIEN



Doc#: 0417334180
Eugene "Gene" Moore Fee: \$18.50
Cook County Recorder of Deeds
Date: 06/21/2004 02:59 PM Pg: 1 of 4

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STATE OF ILLINOIS
COUNTY OF COOK

The claimant, HOPKINS/MID-AMERICAN JOINT VENTURE
Of 820 NORTH WOLCOTT, County of
COOK, State of ILLINOIS 60622,

hereby files a claim for lien against
Mr. Ross Feldman, Director
Mt. Sinai Hospital-Medical
1513 S. California Street
Chicago, Illinois 60618-1797

(hereinafter referred to as "owner"), of COOK County, Illinois
and states:

Above Space for Recorder's Use Only

That on MARCH 31, 2003,

The owner owned the following described land in the County of
COOK & ANDERSONS SUB) SUB OF L 8 &

SEC TN RG BLOCK LOT SUB LOT

24 39 13 7 9 2

Permanent Real Estate Index Number(s): 16-24-221-002-0000

Address(es) of premises: 1513 SOUTH CALIFORNIA -CHICAGO, IL.

That on MAR 31, MAY 31, JUL 31, AUG 31, SEP 22, OCT 06, 31, NOV 24, 30, DEC 22, 31,
2003, JAN 27, 31, MAR 17, 30, APR 01, 26, 30, MAY 01, 31 JUN 01, 2004, the claimant made a
contract with said owner

(1) MR. ROSS FELDMAN AUTHORIZED OR KNOWINGLY PERMITTED BY SAID OWNER TO
MAKE SAID CONTRACT

(2) to PERFORM ELEVATOR MAINTENANCE AND REPAIRS ON ELEVATORS

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For the building (3) BEING _____ erected on said land for the sum of \$127,600.67
And on JUNE 01, 2004 _____, completed thereunder (4) _____
ALL REQUIRED TO BE DONE BY SAID CONTRACT


That at the special instance and request of said owner the claimant furnished extra and additional materials at and extra and additional labor on said premises of the value of \$ _____ and completed same on _____, 20 _____. (5)

That said owner is entitled to credits on account thereof as follows, to-wit

NIL

Leaving due, unpaid and owing to the claimant, after allowing all credits, the balance of \$127,600.67 Dollars ONE HUNDRED TWENTY-SEVEN THOUSAND SIX HUNDRED AND 67/100 DOLLARS For which, with interest the claimant claims a lien on said land and improvements.

HOPKINS/ MID-AMERICAN JOINT VENTURE
(Name of sole ownership, corporation, or partnership)

By 
Robert R. Bailey III

This document was prepared by: Ms. Jacqueline L. Smith - 820 N. Wolcott - Chicago, Illinois 60622
(Name and address)

Mail to: Ms. Jacqueline L. Smith, Director of Special Projects
Mid-American Elevator Company, Inc.
(Name and address)
820 North Wolcott
Chicago, Illinois 60622



Or Recorder's Office Box No.

- (1) If contract made with another than the owner, delete "said owner," name such person and add "authorized or knowingly permitted by said owner to make said contract."
- (2) State what was to be done.
- (3) "being" or "to be" as the case may be.
- (4) "All required to be done by said contract"; or "work to the value of," or, "delivery of materials to the value of \$ _____," etc.
- (5) If extras fill out, if no extras strike out.

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State of Illinois, County of COOK _____ SS.

The affiant, JACQUELINE L. SMITH _____,

Being first duly sworn, on oath deposes and says that he is AUTHORIZED OR KNOWINGLY PERMITTED BY SAID OWNER HOPKINS/MID-AMERICAN JOINT VENTURE

The claimant: that he has read the foregoing claim for lien and knows the contents thereof; and that all the statements therein contained are true.

Jacqueline L. Smith

29th

Subscribed and sworn to before me this _____ day of JUNE 2004

Irene Lewandowski

Notary Public



16-24-221-002 [REDACTED] 5830488

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OFFICE OF THE CLERK OF COOK COUNTY, ILLINOIS
PERMANENT REAL ESTATE INDEX NUMBER AND LEGAL DESCRIPTION

EXEMPT

VOLUME [REDACTED]
572

AREA	SUB-AREA	BLOCK	PARCEL	TAX CODE
16	24	221	2	77030
COOK & ANDERSONS				24 39 13
SUB) SUB OF L 8 &				9 7

AREA	SUB-AREA	BLOCK	PARCEL	CODE	WAR-ANT	2000 DIVISION	THIRD	CARD
00	00	00	00	00	00	0000	0000	00
46	47	48	49	50	51	52	53	54
55	56	57	58	59	60	61	62	63
64	65	66	67	68	69	70	71	72
73	74	75	76	77	78	79	80	

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