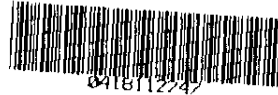


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Doc#: 0418112247
Eugene "Gene" Moore Fee: \$18.50
Cook County Recorder of Deeds
Date: 08/29/2004 01:48 PM Pg: 1 of 4

ORIGINAL CONTRACTOR'S CLAIM FOR LIEN

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With respect thereto, including any warranty of merchantability or
Fitness for a particular purpose.*

STATE OF ILLINOIS

SS.

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

Ms. Charlene Hill-Jeon

Wilson Care

4544 N Hazel

Chicago, Illinois 60604

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

That on DECEMBER 31, 2003 _____,

The owner owned the following described land in the County of
COOK _____, State of Illinois, to wit _____

RUFUS & HALLS SUB PRUITT & MCCRES RESUB (EX W 70FT) & (EX W 30FT) N5
WALLINGFORD SUB

SEC TN RG BLOCK LOT

17 40 14 3)

Permanent Real Estate Index Number(s): 14-17-220-009-0000

Address(es) of premises: 4544 NORTH HAZEL- CHICAGO, IL.

That on DEC 31, 2003, MAR 01, 30, APR 01, 30, MAY 01, JUN 01, 2004 the claimant made a
contract with said owner

(1) MS. CHARLENE HILL-JEON AUTHORIZED OR KNOWINGLY PERMITTED BY SAID
OWNER TO MAKE SAID CONTRACT

(2) to PERFORM ELEVATOR MAINTENANCE AND REPAIRS ON ELEVATOR

Page 1

JUNE AT CUSTOMER'S REQUEST

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For the building (3) BEING _____ erected on said land for the sum of \$4,111.36

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 \$4,111.36 Dollars FOUR THOUSAND ONE HUNDRED ELEVEN AND 36/100 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, President

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

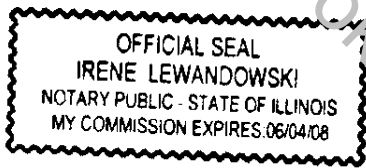
The claimant: that he has read the foregoing claim for lien and knows the contents thereof; and that all the statements therein contained are true.

Jacqueline L. Smith

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

Irene Lewandowski

Notary Public



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