## UNOFFICIAL COPY

## **Claim of Lien**

Claim of Lien	Doc#: 0506745164 Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 03/08/2005 02:38 PM Pg: 1 of 2
State of	
County of _ Cook	
the agent of the	e lienor herein) whose address is Post Office
Box 562 Mundelein, Illinois 600	lorson
and that in accordance with a contract with <u>Janna Pado</u>	materials consisting of thescribe specially radirected materials
separately) All materials to construct	a hair and beauty salon
separately) All materials to construct in her basement.	
<u>in her basement.</u>	
on the following described real property inCOOK	County,
State ofState of	
(Describe real property sufficiently for identification including str	ect and name -
	602 Legal Description 36 Town 40 Range 12 Lot 107 N1/3
	ENY LAKAT BESCH DIJUH
Elmwood Park, Illinois 60/07-2 12-36-210-6 Hillcrest Sub Sec.	36 Town 40 Range 12 Lot 107 N1/3
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Elmwood Park, Illinois 60/07-2 12-36-210-6 Hillcrest Sub Sec.  by total value of	
Elmwood Park, Illinois 60/07-2  12-36-210-6 Hillcrest Sub Sec.  by total value of of which there remains unpaid	
by	ownedownedof a
Elmwood Park, Illinois 60707-2  12-36-210-6 Hillcrest Sub Sec.  by  total value of  of which there remains unpaid  and furnished the first of the items on  January	
by	
by	
Elmwood Park, Illinois 60707-2  12-36-210-6 Hillcrest Sub Sec.  by  total value of of which there remains unpaid and furnished the first of the items on Feitems on  January	
by	
by	
by	

JOHN JOSEPH HOFF

BOX 562 MUNDELEIN, ILLINOIS # 60060

## **UNOFFICIAL COPY**

Signed this ? Th	( _ day of <i>MA</i>	RCH	20 CS	
Lienor:	n Joseph ?	Hoff	,20_ <u>C_3</u>	
Ву:				
Officer or Agent				
State of	Nois}			
On MARCH appeared JOHA	J WICE	JR , 2005	_ before me,	and the second s
personally known to me (or subscribed to the within in capacity(ies), and that by h person(s) acted, executed t WITNESS my hand and offi	is/her/their signature(s) c	asis of satisfactory evidenc ged to me that he/she/the on the instrument the pers	e) to be the person(s) who by executed the same in h on(s), or the entity upon t	ose name(s) is/are is/her/their authorized pehalf of which the
Signature Jennif	Signature of Notary	un Oly	¢	
Affiant Known i	Produced ID	3	C	
Type of ID D//		· · · · · · · · · · · · · · · · · · ·	74	
P. Contraction of	OFFICIAL SEAL" NNIFER N ASKIN MISSION EXPIRES 08/19/08		Corts	