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Recording requested by:	
When recorded, mail to:	Doc#: 0729718138 Fee: \$28.00
	Furane "Gene" Moore tillor
Name:	Cook County Recorder of Deeds Date: 10/24/2007 04:35 PM Pg: 1 of 3
Addr" :	Date: 10/24/2007 04:33 1 tm / 5
City:	
State/Zip:	
Section of the sectio	pace above reserv
Special supplies the supplies of the second supplies the second su	
C	LAIM OF LIEN
State of	
County of Cook	_
1 2553 Condo Asis cinti	, being duly sworn, state the following:
Leaserdance with an agreement to provide wir. and/or	r material, I did furnish the following labor and/or materials: Special Assessment 23000 Special Assessment 3 160.00. County State of Illinois
In accordance with an agreement	& Special Assessment The 21000.
ASSOCIATION WES	D. 55 Special MESESSMONI
Soedin Assistment	Tllinois
the following described real property located in	COOK County, State of Illinois,
commonly known as: 2553 W W	ilson Unit G (GARMEN)
Chicano IL	16062.3
and legally described as:	Cook County, State of
and legally described as: PIN#_ 13-13- 27	27-07
1	512 ELAKE SHORE DR.
which property is owned by Drnsc & Aloc	M () MACIU, whose address is
	·
of a total value of \$ 675.15 , of w	hich there remains unipake and the last of the items
and I further state that I furnished the first of the items	s on the date of, and
on the date of 10/67/07	
•	, claim a lien against the above-describe a property in the amount
I hereby, under the laws of the State of	cot 5 , claim a lien against the above-described, 147
of money, stated above, which remains unpaid to me.	
A X = A X X	
Signature of Person Claiming Lien	
Philipping on 1 cason American	
capid w	
Name of Person Claiming Lien	CONT. CONTRIBUTION
Address:	

0729718138 Page: 2 of 3

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On <u>CAST 22, 2667</u>	came before me personally and under each states that
he/she is the person described in the above document and that he/she signed the above document	cument in my presence.

Notery Signature	OFFICIAL SEAL
Notary Public, In and for the County of State of The Stat	DARIN D RUBINO NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:11/30/08
My commission expires: /// \$ / C \$	Seal
CERTIFICATE OF MARLI	NG
. certify that on this date.	
this Claim of Lien by USPS certified mail, return receipt requested, in accordance wit	h the law, to,
Ox	
Name:	
Address:	
Date: Signature of Person Mailing Claim of Lien	
4/2	_
3	
Signature of Person Mailing Claim of Lien	C
	·0/4
Name of Person Mailing Claim of Lien	· · · · · · · · · · · · · · · · · · ·
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0729718138 Page: 3 of 3

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The following is a copy of a Legal Description Record held by the Cook County Clerk.

If you need a certified copy of this record, please request it and it can be provided within 24 hours.

Condominium

<u> 3406</u>を and Amended by Doc#_

Price \$5.00

Init LC

County Clerk Map Dept