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LIEN STATEMENT BY LIEN CLAIMANT

ТО	Co	COUNTY, ILLINOIS, REGISTER OF DEEDS:
	1.	Notice is hereby given that Coack Coshaudion intends to claim and hold a lien in the amount of 3902.60 on certain real property.
	2.	Such amount is due and owing to the claimant for labor performed, or for skill, services, material, or machinery furnished.
	3.	The name and post-office address of the claimant is:
		Corick Corstanction 3917 W. 41 St AVE Cook County Recorder of Deeds Date: 07/27/2012 02:48 PM Pg: 1 of 2
	4.	The name and address of the person for or to whom the work was performed or the material or machinery was furnished is:
		Tiez LEBRY 11711 S. PARNEII ANE Chicago, IL GOUDS
	5.	The first items of the claimant's contribution were made on Mouse, 2012. The last items of claimant's contribution were made on
e north 12 of loo clusive in blo gether with 16	7.	The description of the property to be charged with the lien is as follows: and all of lot 44 in block 2 in the result insion of lots 11 to 16,27 to 32, all and lots 11 to 32 inclusive in blocks? Listots 1 to 10, Inclusive in block 3 The name and address of the owner of the property to be charged at the time of making such statement, according to my best information.
		making such statement, according to my best information, is: A foresaid the 16 foot alk The z Leney Yunning ec st and west through the Chicago, IL 60628 All in Hannah & Canos Addition to Pullman A Subdition to
	8.	An itemized statement of the account upon which the lien is claimed is as follows: 21, Township 37 Nort Range 14 Shorts of phyward. Homeawar Heridian in Cook (ownly did not pay tor the Completion Illinois At the yob nor the deductible. 25-21-323-022
Prepared	DY.	Bree Ann Kirkland 3917 W415 Ave Gay In46408

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Padinal Von	
Signature of Person Claiming Lien	
ROOSEN KURSIC	
Name of Person Claiming Lien	
Address of person claiming lien: 3917 W. 41 St AVE Grown, Fr. 46408	
On,	came before me perso
and, under oath, stated that he/she is the person described in the above docume	ent and that he/she signed the acc
document in my presence.	
Notary Signature Knewlinite, IN.	
Notary Public, In and for the County of LAKG State of TNOINA	/A
My commission expires: 10-14-2016	Seal
<u></u>	:
CERTIFICATE OF MAILING	
I, , certify that on this Jake.	
mailed a copy of this Claim of Lien by USPS certified mail, return receipt reur	rested, in accordance with the la
	75
Name:	O_{κ}
Address:	T'S OFFICE
Date:	
Signature of Person Mailing Claim of Lien	
Name of Person Mailing Claim of Lien	
pared by Bree Ann Kirkland 3917 W415T Cam In 46408	
397 W4185	
Gan In 46408	