UNOFFICIAL COPILITIES OF THE PROPERTY OF THE P

Doc#: 1220947046 Fee: \$62.25 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 07/27/2012 02:48 PM Pg: 1 of 2

Recording requested by: _ When recorded, mail to: Space above reserved for use by Recorder's Office Name: John Document prepared by: Name Kadosav City: Country Club Hills State/Zip: Tllings 63 Claim of Lien State of Alling County of (being duly sworn, state the following: In accordance with an agreement to provide labor and/or material. I did furnish the following labor and/or materials: on the following described real property located in Cook Lot 389 in block 15 in Whoston Park unit No.4 Being a subdivisor of the Hortheast '4 of the Northwest '4 of Section 35, Township 36 North, Range 13 East of the third principal and legally described as: mointain According to the class in and legally described as: meridian. According to the plat thereof registered in the office of the registrar of titles of cook carry Illinois on August 81971. As document Number 2573515 28-35-113-807 Number 2573515 which property is owned by John Hassey, whose address is 17686 Central Park Are Country Club Hills, ILL, of a total value of \$____ , and I further state that I furnished the first of the items on the date of remains unpaid \$_\500^{\cdot\infty} , claim a lien against the above-described I hereby, under the laws of the State of Tllinois property in the amount of money, stated above, which remains unpaid to me.

UNOFFICIAL COPY

Chadra Von	
Signature of Person Claiming Lien	_
ROOSOV KISHI'C	
Name of Person Claiming Lien	-
_	
Address of person claiming lien: 3917 W. 41 St WE Gary, Fr. 46408	
On	came before me personally
and, under oath, star a hat he/she is the person described in the above document as	nd that he/she signed the above
document in my presence.	•
2	
Notary Signature Mervilly: 1/2.	
Notary Public,	
Transfer the Countries 1 10 11 1 To See See See See See See See See See Se	
In and for the County of LAK State of TNOINA My commission expires: 10-14-2016	
My commission expires: 10-14-2016	Seal
CERTIFICATE OF MAILING	:
I,, certify that on this date,	I have
mailed a copy of this Claim of Lien by USPS certified mail, return receipt requested	in accordance with the law to
The state of the s	s in accordance with the law, to:
Name:	
A ddragg	Orrica
Address:	
Date:	Ö
	•
Signature of Person Mailing Claim of Lien	
Name of Person Mailing Claim of Lien	
1/20 (1: 1/20)	•