

UNOFFICIAL COPY



Doc#: 1224947000 Fee: \$42.25  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 09/05/2012 11:34 AM Pg: 1 of 2

Recording requested by: \_\_\_\_\_

When recorded, mail to: \_\_\_\_\_

Name: Sherry Mahone  
Address: 8437 S Sangamon St  
City: Chicago  
State/Zip: Illinois 60620

Space above reserved for use by Recorder's Office

Document prepared by:

Name: Radosav Kljajic  
Address: 3917 W 41st Ave  
City/State/Zip: Gary Indiana 46408

### Claim of Lien

State of Illinois

County of Cook

I, Radosav Kljajic, 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 County,

State of Illinois, commonly known as:

Lot 33 in Block 3 in Bellamy's Subdivision of the north  
40 acres of the south 60 acres of the east 1/2 of the  
and legally described as: Southeast 1/4 of section 32, Township 38 North, Range 15  
East of the third principal Meridian, in Cook County,  
Illinois.

which property is owned by Sherry Mahone, whose address is 8437 S Sangamon

Chicago Illinois 60620, of a total value of \$ 8,593.77, of which there  
remains unpaid \$ 5,091.77, and I further state that I furnished the first of the items on the date of

March 15, 2012, and the last of the items on the date of August 15<sup>th</sup> 2012.

I hereby, under the laws of the State of Illinois, claim a lien against the above-described  
property in the amount of money, stated above, which remains unpaid to me.

# UNOFFICIAL COPY

Radosav Kljajic  
Signature of Person Claiming Lien

Radosav Kljajic  
Name of Person Claiming Lien  
Address of person claiming lien: 3917 W 41st Ave  
Gary Indiana 46408

On September 4<sup>th</sup> 2012, Radosav Kljajic came before me personally and, under oath, stated that he/she is the person described in the above document and that he/she signed the above document in my presence.

Bree Ann Kinnel  
Notary Signature

Notary Public,

In and for the County of Lake State of Indiana

My commission expires: 7/27/2016 Seal

**BREE ANN KINNEL**  
Notary Public, State of Indiana  
SEAL  
My Commission Expires 7/27/2016

### 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:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Mailing Claim of Lien

\_\_\_\_\_  
Name of Person Mailing Claim of Lien