## **UNOFFICIAL COPY**



Doc#: 1323957017 Fee: \$40,00 RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 08/27/2013 11:29 AM Pg: 1 of 2

Recording requested by:	
When recorded, rapil to:	
Name: Herber's Samuels	Space above reserved for use by Recorder's Office
Address: 1220 Prince Drive	Document prepared by:
City: South Holland	Name Radosav Kljajic
	Address 3917 W41 ST Ave
State/Zip: 11/1/10/15 100/173-1127	City/State/Zip Gary Indiana 46408
Claim of Lien	
State of Minois	$T_{\odot}$
County of Cook	
	, being duly sworn, state the following:
I, Radosav Kljajic	learned or material I did furnish the following labor and/or materials:
Viny I double four siding.	Havled away cir debris. n cedar.
on the following described real property loca	
State of 111inois	_, commonly known as:
LOT 51 in Wi	nona Terrace Subdivision, Bring a Subdivision township 36 North, Range 14, East of the third
11 the described as: Doin of and Ma	eridion living North of the Little Calumet River
and south	of the Right of Way of the Pittsburg. Chicago RailRoad in Cook County Illinois
and st. Louis	RailRoad in Cook County Illinois
which property is owned by Herbert	Samuels, whose address is 1220 Prince Drive
a will book Illianis	of a total value of 3 11, 210.
- 1196	and I firsther state that I illimated the most of the
June 12 2013, and	the last of the items on the date of July 3rd 2013
I hereby, under the laws of the State of \\	, claim a lien against the above-described
property in the amount of money, stated ab	ove, which remains unpaid to me.

1323957017 Page: 2 of 2

## **UNOFFICIAL COPY**

Signature of Person Claiming Lien
Name of Person Claiming Lien 3917 W 415T Ave  Name of Person Claiming Lien Gary Indiana 46408  Address of person claiming lien:
On August 2200, 2013 Radosov Kljajicame before me personally and, under oath, stated the he/she is the person described in the above document and that he/she signed the above document in my presence.
Notary Public,
In and for the County of Lave State of Transcore Seal  My commission expires: 7/27/2016  CERTIFICATE OF MAILING
certify that or this date,, c
mailed a copy of this Claim of Lien by USPS certified man, reunit receipts  Name:  Address:
Address:  Date:
Signature of Person Mailing Claim of Lien
Name of Person Mailing Claim of Lien