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Doc#: 1408056061 Fee: \$32.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 03/21/2014 02:01 PM Pg: 1 of 3

Recording requested by: Suburban Home Restoration, LTD Space above reserved for use by Recorder's Office
When recorded, mail to: _____ Document prepared by:
Name: Suburban Home Restoration, LTD Name Hyoun S Choi
Address: 2 S. Wolf RD Address 2 S. Wolf RD
City/State/Zip: Prospect Heights, IL 60070 City/State/Zip Prospect Heights, IL, 60070

Claim of Lien

State of ILLINOIS
County of COOK

I, Hyoun S Choi, 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: Remove and Replace Roofing

on the following described real property located in Cook County, State of
ILLINOIS, commonly known as: 129375 Division St Blue Island,
ILLINOIS. 60406

and legally described as: 25-31-212-001-0000
25-31-212-002-0000

which property is owned by Khan, Arshia, whose address is
129375 Division St Blue Island IL 60406, for a total value
of \$ 13255.91, of which there remains unpaid \$ 6604.47, and I further state that I
furnished the first of the items on the date of Oct/17/2013, and the last of the items on

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LEGAL DESCRIPTION

LOTS 19 AND 20 IN BLOCK 3 IN BRAND'S SUBDIVISION OF BLOCKS 1 AND 2 AND RESUBDIVISION OF BLOCKS 3 AND 4 IN REHM'S ADDITION TO BLUE ISLAND IN THE NORTHEAST 1/4 OF SECTION 31, TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Property of Cook County Clerk's Office

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the date of March / 21 / 2014.

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.

[Signature]
Signature of Person Claiming Lien

HYOUN S. Choi
Name of Person Claiming Lien

Address of person claiming lien:

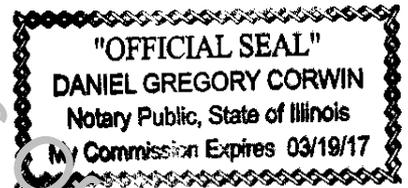
On March, 21 / 2014, HYOUN S. Choi came before me personally and, under oath, stated that he/she is the person described in the above document and that he/she signed the above document in my presence.

[Signature]
Notary Signature

Notary Public,

In and for the County of COOK State of ILLINOIS

My commission expires: 03/19/17



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:

Name: _____

Address: _____

Date: _____

Signature of Person Mailing Claim of Lien

Name of Person Mailing Claim of Lien