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Doc#: 1435347011 Fee: \$42.25 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A.Yarbrough

Cook County Recorder of Deeds Date: 12/19/2014 11:13 AM Pg: 1 of 2

Recording requested by:	
When recorded mail to:	
Name: Edgox Friloux	Space above reserved for use by Recorder's Office
Address: 26 E 121 ST place.	Document prepared by:
City: Chicago	Name Radosay Kligiic
State/Zip: Illinois 601628	Address 3917 W 41ST Ave
Ox	City/State/Zip Gary Indiano 46408
Claim of Lien	
State of Tllinois	L
County of Cook	0,
I Radosav Kliajic	, being duly swom, state the following:
	ar and/or material, I did furnish the following labor and/or materials:
Home repair Work.	holder completed
Money is owed on	Legal Confract
on the following described real property located	· Æ/
State of Tilinois, c	
-ot 13 (except the each 13 % for	et thereof) and the east 115/2 feet of ict 14 in
back 5 in George HG Inver an	d others resubdivision of blocks 5 to be
alto legally described as: 1/10/03/1/16 12 17	and Scholars and Har will be a very
Kensing to and the north 1/2,	of block 14, 15 & 16 in the First Addition to
which property is owned by [] as ~ [iorthwest Asechen at Township strong in
Chicago Tilling	whose address is $\frac{26E1215Tp}{}$, of a total value of \$ $\frac{8862.73}{}$, of which there
Chicago trimos	, of a total value of 3 6000, of which there
	and I further state that I furnished the first of the items on the date of
Nov 1 2014, and the la	ast of the items on the date of NOV 37014.
I hereby, under the laws of the State of	, claim a lien against the above-described
property in the amount of money, stated above, w	which remains unpaid to me.
Pin #25-27-118-04	16-0000

1435347011 Page: 2 of 2

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Radocal Kharia Santa Glaiming Lien 3917 w 4157 Ave Address of person Claiming Lien 3917 w 4157 Ave Address of person Claiming Lien 3917 w 4157 Ave Address of person Claiming Lien 6 and 4 and 4 and 5 an	Lodern Kha	ــــــــــــــــــــــــــــــــــــــ	
Address of person claiming lien: Gary Fridiana Hove On Decarity 15t 2014. Rados at Klain came before me personally and, under oath, star a that he/she is the person described in the above document and that he/she signed the above document in my presence. Notary Signature Notary Public, In and for the County of State of Thirds My commission expires: 7-27-2016 Seai CERTIFICATE OF MAILING I, certify that on this date,, I hav mailed a copy of this Claim of Lien by USPS certified mail, return receipt requisited, in accordance with the law, to: Name: Address: Date: Signature of Person Mailing Claim of Lien Signature of Person Mailing Claim of Lien	Signature of Person Claiming Lien	0	
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On Decoming 187 2014. Radosou Klay	Address of name alaiming lies.	39116 71 100	
and, under oath, stay a that he/she is the person described in the above document and that he/she signed the above document in my presence. Continued of the county of	Address of person clauming near.	Gary Indiana4640	18
and, under oath, stay a that he/she is the person described in the above document and that he/she signed the above document in my presence. Continued of the county of			
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Notary Public, In and for the County of	document in my presence.		
Notary Public, In and for the County of	\tilde{a}		
Notary Public, In and for the County of	Lack hon Sul	6-0	
In and for the County of	Notary Signature		
My commission expires:	Notary Public,		
My commission expires:	In and for the County of	State of Illinois	
CERTIFICATE OF MAILING I,	My commission expires: 7-2	_	-
I,		J. C.	
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	CERTIFICATE OF MAILING		
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Name: Address: Date: Signature of Person Mailing Claim of Lien	mailed a copy of this Claim of Lien by		
Signature of Person Mailing Claim of Lien		, 2 to mind mini, reality recorps 250 the season, in all	columnec with the law, to.
Signature of Person Mailing Claim of Lien	Name:		
Signature of Person Mailing Claim of Lien	A 33) X.
Signature of Person Mailing Claim of Lien	Address:		
Signature of Person Mailing Claim of Lien	Date:		Ö
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