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OFFICIAL RECORD
Requested By:
E CONKLIN RESTORATION

Douglas County - NV
Karen Ellison - Recorder
Page: 1 of 2 Fee: 15.00
BK-0210 PG- 2517 RPTT: 0.00



APN: 1318-03-210-028

Recording requested by: Servpro of Reno
When recorded, mail to:

Name: Servpro of Reno Southwest
Address: 46 Hardy Dr.
City: Sparks
State/Zip: Nevada 89431

Space above reserved for use by Recorder's Office

Document prepared by:
Name Nataie Boardman-May
Address 46 Hardy Dr.
City/State/Zip Sparks NV 89431

Claim of Lien

State of Nevada
County of Washoe

I, Travis Conklin, 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:

Fire damage Restoration to Structure + Contents

on the following described real property located in Douglas County,
State of Nevada, commonly known as:

and legally described as: APN # 131803210028

which property is owned by Frank Stein, whose address is 1009 Skyland
Zephyr Cove, NV, of a total value of \$ 12,363.89, of which there
remains unpaid \$ 12,363.89, and I further state that I furnished the first of the items on the date of
4/18/09 and the last of the items on the date of 2/10/2010.

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

Senupro of Reno Southwest

By: [Signature]
Signature of Person Claiming Lien

Senupro of Reno Southwest

By: Travis Conklin
Name of Person Claiming Lien

Address of person claiming lien:

On February 10, 2010, Travis Conklin 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.

Heather McKinney
Notary Signature

Notary Public.



In and for the County of Washoe State of Nevada
My commission expires: July 5, 2013 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

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PG- 2518
02/12/2010
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