

APN: 1220-02-001-030
Recording requested by and mail documents
and tax statements, if applicable, to:
Name: TOM Goldston Roofing, INC
Address: PO Box 7013
City/State/Zip: Gardnerville NV
89460
LIN101
Nevada Legal Forms & Tax Services
www.nevadalegalforms.com



KAREN ELLISON, RECORDER

NOTICE OF LIEN (Mechanic Lien)

NOTICE IS HEREBY GIVEN:

1. That TOM Goldston Roofing, INC
hereinafter known as "Claimant", hereby claims a lien pursuant to the provisions of N.R.S.,
108.221 to 108.246 inclusive, on property located in _____
County, Nevada. (Set forth legal description and commonly known address, if known)
Parcel 1 of Shining Mountain Ranch
Document # 505023
1697 TOLER RD
GARDNERVILLE NV 89460
2. The amount of the original contract is: \$ 6270⁰⁰
3. The total amount of all additional or changed work, materials and equipment, if any, is:
\$ 0
4. The total amount of all payments received to date is: \$ 650⁻
5. The amount of the lien, after deducting all just credits and offsets is: \$ 5620⁻
6. The name of the owner(s), if known, of the property is/are: _____
JOHANNA SYPHUS
7. The name of the person by whom the lien claimant was employed or to whom the lien
claimant furnished or agreed to furnish work, materials or equipment is: _____

8. A brief statement of the terms of payment of the lien claimant's contract: _____

10% Deposit BALANCE upon Completion

9. That the claim herein is entitled to a reasonable attorney's fee, statutory interest on the amount of this lien claim and costs incurred in perfecting this lien claim.

10. THIS FORM COMPLIES WITH NRS 108.226.

In Witness Whereof, I/We have hereunto set my hand/our hands this 15 day of FEB 20 17

TOM A Goldston
Print name of Claimant

By: Tom A Goldston
Authorized Signature

STATE OF NEVADA)
COUNTY OF Douglas)

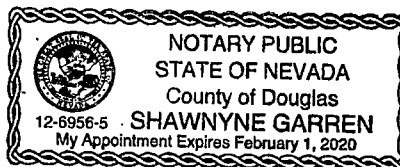
Tom A Goldston, being first duly sworn on oath according to law, deposes and says:

I have read the foregoing Notice of Lien claim, know the contents thereof and state that the same is true of my own personal knowledge, except those matters stated upon information and belief, and, as to those matters, I believe them to be true.

Tom A Goldston
Authorized Signature of Claimant

Subscribed and sworn to before me this 15 day of February, 20 17.

Shawnyne Garren
Notary Public
My commission expires:



Consult an attorney if you doubt this forms fitness for your purpose.