

Recording Requested by:

Please Return To:

SPACE ABOVE FOR RECORDER'S USE

AUTHORITY TO CANCEL NOTICE OF CLAIM OF LIEN

Claimant

(Give name & address)

THE LIEN

Recorded ____/____/20____

Book ____ Page ____

Other: _____

Property Liened (Property)

(Give municipal address & legal description)

State of Arizona, County of _____

Property Owner (Owner)

(Give name & address)

You are hereby authorized to mark "Cancelled" on the above-identified Lien.

Notary: On the ____ day of _____,
20____, In the State of _____,
County _____ of _____,
_____, Agent for Claimant,
personally came and appeared before me, and
executed this instrument in the agent's stated
capacity, with proper authority from the
Claimant.

Notary Public

Signed this ____ day of _____,
20____.

Agent for Claimant

Signed by: _____

Title: _____