COLLECTIONS SECTION OFFICIAL COPY
401 S STATE ST 4TH FLOOR

CHICAGO , IL 60605-1225



Eugene "Gene" Moore Fee: \$26.50

Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 06/27/2003 03:18 PM Pg: 1 of 2

MAMAX INC

684 COUNTY LINE RD BENSENVILLE

IL

60106-3260

04/12/2003 ACCOUNT NUMBER 4158035

DOCUMENT ID. 0532030462

NOTICE OF LIEN FOR CONTRIBUTIONS UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

PURSUANT to Section 2400 and 2401 of the Illinois Unemployment Insurance Act, as amended, notice is hereby given that there is due to the Director of Employment Security of the State of Illinois from the above named employer:

CONTRIBUTIONS and penalties, and interest on such unpaid contributions at the rate of 1% per month or 1/30 of 1% per day to 12/31/81, and at the rate of 2% per month or 12/365 of 2% per day from 01/01/82. (NOTE: Effective 01/01/88, payment received more than 30 days after the due date is deemed to have been received on the last day of the month preceding the month in which the payment was received).

QTR/YR	CONTRIBUTIONS	UNPAID PENALTIES	PLUS INTEREST ON CONTRIBUTIONS OTHER 10 04/30/2003
1/2002	5,691.49	0.00	0.00 7,253.68
	5,691.49	0.00	0.00 1,253.68

THAT, by virtue of the above named sections, the amount of the aforesaid contributions, interest and penalties, together with such contributions, interest and penalties which may hereafter become due, are a lien in favor of the Director of Employment Security of the State of Illinois upon all the real and personal property or rights thereto owned or thereafter acquired by the aforementioned employer.

A remittance of \$6,945.17 (interest included) received on or before 04/30/2003, or a remittance of \$7,057.44 (interest included) on or before 05/31/2003 will clear these delinquencies in your account.

SYS

0317822273 Page: 2 of 2

MAMAX INC

UNOFFICIAL COPY

684 COUNTY LINE RIBENSENVILLE

ΙL

60106-3260

4158085 203 NL

ACCOUNT NUMBER 4158085

04/12/2003 DOCUMENT ID. 0532030462

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

Return the attached payment coupon with your remittance. Please include the document number (0532030462) and employer account number on your remittance.

Mail all other correspondence to:

Illinois Department of Employment Security Collections Section 401 S. State Street Chicago, IL 50605

Director of I

Director of Employment Security

Collection Manager (312) 793-8333

RECORD NO. _____ RECORD DATE ____ COUNTY CODE 31