COLLECTIONS SECTION UNOFFICIAL COPY
33 S STATE ST 10TH FLOOR

CHICAGO

L 60603-2802





Doc#: 0510342164
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 04/13/2005 10:22 AM Pg: 1 of 2

MONTESSORI MADEMY & ASSOC, INC.

11019 - 31 S. HALSTED

CHI CAGO

IL

60628-3908

04/09/2005 ACCOUNT NUMBER 2079301

DOCUMENT ID. 0552016930

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).

		UNPAID		PLUS INTEREST ON CONTRIBUTIONS
QTR/YR	CONTRIBUTIONS	PENALTIES	OTHER	TO 04/30/2005
1/2004	2,709.55	0.00	0.00	596.85
	2,709.55	0.00	0.00	596.85

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 \$3,306.40 (interest included) received on or before 04/30/2005, or a remittance of \$3,359.85 (interest included) on or before 05/31/2005 will clear these delinquencies in your account.

0510342164 Page: 2 of 2

MONTESSORI ACADEMY ASSOCIATION

11019 - 31 S. HALSTED

CHICAGO

IL

60628-3908



ACCOUNT NUMBER 2079301

04/09/2005 DOCUMENT ID. 0552016930

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

Return the attached payment coupon with your remittance. Please include the document number (0552016930) and employer account number on your remittance.

Mail all other correspondence to:

Illinois Department of Employment Security Collections Section 33 S. State Street Chicago, IL 62603

Director of 1

Director of Employment Security

Collection Manager (312) 793-8333

RECORD NO. _____ RECORD DATE ____ COUNTY CODE 33