



STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

Doc#: 0628931051 Fee: \$26.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 10/16/2006 11:11 AM Pg: 1 of 1

CERTIFICATE OF
RELEASE OF LIEN

- FOR MEDICAL ASSISTANCE
- BLIND ASSISTANCE
- AGED ASSISTANCE
- DISABILITY ASSISTANCE

Notice is hereby given that I, Linda Shumate, Acting, acting in my official capacity as Local Office Administrator for the County of Cook, State of Illinois, for and in consideration of \$3,061.67, do hereby release the lien for assistance as checked above, which was paid to or on behalf of:

EZEKIEL HARRIS

P3-237-848760

Dated 10/07/2004, and recorded in, Cook County, State of Illinois, on 10/15/2004 and 1/20/1995 and 4/13/1995 and 12/22/1999, under Document No. 0428905149 and 95044995 and 95246160 and 09187970 against the following described real property:

Lot 13 in Block 10 in Mills and Sons Subdivision of Blocks 3, 4, 5 and 6 in the Subdivision of Blocks 1 and 2 in the Foster Subdivision of the East 1/2 of the Southeast 1/4 of Section 3, Township 39 North, Range 13, East of the Third Principal Meridian in Cook County, Illinois and commonly known as 1037 North Keeler, Chicago, Illinois 60651-3506.

P.I.N. 16-03-412-008-0000

Dated 10/12/06 Linda M. Shumate
LOCAL OFFICE ADMINISTRATOR

State of Illinois } Illinois Dept. of Healthcare and
 } Family Services
 } SS Bureau of Collections
 County of Cook } Technical Recovery Section
 } 32 West Randolph St., 13th Floor
 } Chicago, Illinois 60601-3412

I, ESTELL HARDIMAN, Notary Public do hereby certify that Linda Shumate, Acting, Local Office Administrator, personally known to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she/he signed the said instrument as required by law, for the uses therein set forth.



(SEAL)

Given under my hand and seal this
12 day of October, A.D., 2006
Estell Hardiman
Notary Public