

STATE OF ILLINOIS  
DEPARTMENT OF  
HEALTHCARE AND FAMILY SERVICES

UNOFFICIAL COPY



Doc#: 0707526140 Fee: \$26.00  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 03/16/2007 03:38 PM 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 \$25,000.00, do hereby release the lien for assistance as checked above, which was paid to or on behalf of:

**ANN FOLICE**

**91-200-849067**

Dated 08/29/2005, and recorded in, Cook County, State of Illinois, on 08/31/2005, under Document No. 0524319066 against the following described real property:

Lot 20 in Weiler and Others' Subdivision of Lots 26, 27 and 28 in North Addition to Chicago, in Cook County, Illinois a Subdivision of the South West Quarter of the South East Quarter of Section 33, Township 40 North, Range 14, East of the Third Principal Meridian. Commonly known as 1621 N. Sedgewick, Chicago, Illinois 60641  
P.I.N. 14-33-421-004-0000

Dated 3/15/07 Linda M. Shumate  
LOCAL OFFICE ADMINISTRATOR

-----

State of Illinois	}	Illinois Dept. of Healthcare and Family Services
	}	Bureau of Collections
County of Cook	} SS	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  
15 day of March, A.D., 2007  
Estell Hardiman  
Notary Public