UNOFFICIAL COPY



STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

CERTIFICATE OF RELEASE OF LIEN

RELEASE OF LIEN

FOR: [] MEDICAL ASSISTANCE
 [] BLIND ASSISTANCE
 [] AGED ASSISTANCE
 [X] DISABILITY ASSISTANCE

Doc#: 0720626090 Fee: \$26.00 Eugene "Gene" Moore Cook County Recorder of Deeds

Date: 07/25/2007 10:47 AM Pg: 1 of 1

Notice is hereby given that I, <u>Linda Shumate</u> acting in my official capacity as Local Office Administrator for the County of Cook, State of Illinois, for and in consideration of <u>\$2,753.66</u>, do hereby release the lien for assistance as c^t ec) ed above, which was paid to or on behalf of:

Pedro Martinez 03-237-D92724

Dated 05/18/1999, and recorded in, Cook County, State of Illinois, on 05/20/1999, under Document No. 99488517 against the following described real property:

Lot 6 in Christene Bruses Resubdivicion of Lots 29 to 47, 84 to 93, in Walter Herrick Subdivision of Block 6 in Superior Court Partition of, Section 2, Township 39 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 1117 N. Spaulding, Chicago,

Illinois 60651. P.I.N. 16-02-410-013-0000

Dated, /80/07

Coal Office Administrator

State of Illinois

County of Cook

ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES

SS Technical Recovery Unit

32 W. Randolph Street 13th Floor

Chicago, Illinois 60601

I, <u>Estell Hardiman</u>, Notary Public, do hereby certify that <u>Linda Shumate</u>, DHS 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.

OFFICIAL SEAL(SEAL)
ESTELL HARDIMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:01/21/11

Given under my hand and seal this day of July, A.D., 2007

Notary Public

HFS 233 (R-7-2005)

Box 348

IL478-2317