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NOTICE OF LIEN

PREPARED BY AND RETURN TO:

Illinois Dept, of Healthcare and Family Services

Collection and Asset Recovery Unit PO BOX 19152

PODUM 19102

SPRINGFIELD, IL 62794

To:

COUNTY RECORDER COOK COUNTY

69 WEST WASHINGTON 5TH

FLOOR

CHICAGO, L. 60602

Doc#: 0732315090 Fee: \$26.50

Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 11/19/2007 01:08 PM Pg: 1 of 1

RE: TIMOTHY RASMUSSEN 11531 S BELL AVE CHICAGO, IL 60643-4713

NCP RIN#: 123347221

In accordance with Article X of the Illing is Public Aid Code and 89 Illinois Administrative Code 160.70(g), YOU ARE HEREBY NOTIFIED, that the Illinois Department of Public Aid is placing a lien on real estate located in the County of COOK, IL described as P.I.N # 25 19 304 004 0000.

Legal Description:

Section-Township: 19-37-14 SubDiv-Condo: WALKERSR B/CR/B/A-#2

Lot #: 10 Block #: 1

This action is being taken as a result of your child support obligation. There is now due, less credits and offsets, a sum of \$8,660.58 as of 09/30/2007 which may include interest by operation of 18 %.

In accordance with 735 ILCS 5/12-109, 750 ILCS 5/505, 735 ILCS 5/2-1303, 305 ILCS 5/10-1, 750 ILCS 16/20 and 16/25, 750 ILCS 28/15 and 750 ILCS 45/20.7, interest will continue to accrue on the u paid support until paid in full.

The owner(s) of the property listed above, has already been notified of the right to release this the against the real estate by making payment, in full, of the past-due support amount to the Illinois Healthcare and Family Services, Bureau of Fiscal Operations IV-D Accounting, P.O. Box 19131, Springfield, IL 62794-9131 (217-782-2950). This lien shall remain on this property until further notification from the Illinois Healthcare and Family Services.

THAT THIS DOCUMENT SHALL SUPERSEDE ALL PREVIOUS CHILD SUPPORT LIENS FILED ON BEHALF OF THIS CHILD SUPPORT CASE.

Prepared by: ILLINOIS HEALTHCARE AND FAMILY SERVICES

D-MI D-MI

DATE: 10/29/2007

Assistant Manager, Collection and Asset Recovery Unit

217-782-2950 DPA 237A (N-9-01)

IL478-020