UNOFFICIAL COPY

STATE OF ILLINOIS **DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES** County of Cook Doc#: 0813733113 Fee: \$26.00 Eugene "Gene" Moore Notice Of Claim Upon Real Estate By Virtue of [] 305 ILCS 5/3-9 Cook County Recorder of Deeds [X] 305 ILCS 5/5-13 Date: 05/16/2008 11:34 AM Pg: 1 of 1 FOR: [X] MEDICAL ASSISTANCE [] BLIND ASSISTANCE [] AGED ASSISTANCE [] DISABILITY ASSISTANCE NOTICE IS HEREBY GIVEN: That the Illinois Department of Healthcare and Family Services asserts a claim upon the premises legally described Lot 13 inTheodore P. Shout's Subdivision of the East half of the Southwest quarter of the Southeast quarter of the Southwest quarter of Section 17. Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 6230 S. Laflin, Chicago, Illinois 60636-2334 P.I.N. 20-17-236-030-0000)FCOO+(THAT the assistance as checked above was awarded to: 91-208-818681 **LESSIE SEALS** from 06/05/2007 through 12/01/2007; inclusive, in the aggregate amount of \$496.40. THAT no part of said Assistance has been repaid to the Claimant, eitner by the recipient, their heirs, devisees, legatees, or by any other person(s) on behalf of the estate. THAT the amount claimant demands for said Assistance is \$496.40, the said amount being now due and owing to the claimant. THAT said \$496.40, is hereby asserted by the ILLINOIS DEPARTMENT OF HEALTH ARE AND FAMILY SERVICES as a claim upon the described real estate. ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY, SERVICES Claimant Illinois Dept. of Healthcare and By Authorized Representative **Family Services** STATE OF ILLINOIS **Bureau of Collections Technical Recovery Section** COUNTY OF COOK 32 West Randolph St. 13th Floor Chicago, Illinois 60601-3412 MAN, being first duly sworn upon oath, deposes and says that they are an authorized agent and representative of the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES, in and for the County of Cook, and claimant in the foregoing claim, that he has read the same, knows the contents thereof, and believes the same to be true. Subscribed and sworn to before me this A.D., **Loo** 8. **⊘**⊈_day of _ My commission expires __/_

HFS 289 (R-4-99)

OFFICIAL SEAL
ESTELL HARDIMAN | 1478-23
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:01/21/11