UNOFFICIAL CO

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN

Doc#: 0819741046 Fee: \$38.00

Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 07/15/2008 10:49 AM Pg: 1 of 1

[X] INITIAL LIEN
[] RENEWAL

DATE OF INITIAL LIEN

Notice is helecy given that I, Thomas Sajdak, acting in my official capacity as an Authorized Representative of the Bureau of Collections, Technical Recovery Section in the Department of Healthcare and Fernity Services, and my successors in office, hereby claim and intend to hold a lien on the following described real estate, to-wit:

Lot 28 in Block Two (2) in Figure Manor Subdivision of the East half (1/2) of the Southeast Fractional Quarter (1/4) of section six (6). Township 36 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Prioperty Address: 53 Circle Drive, Dix.ncor, IL. 60426-1108

PIN: 29-06-426-028

A legal or equitable interest in said described real estate is owned by:

CLIENT NAME: RUBY WILLIAMS

CASE ID #: 91-091-040440

ADDRESS: Heritage Manor, 900 North Rutledge, Springfield, 12 32702-3799

This lien is claimed for all assistance paid to or on behalf of said client, under Article III and/or Article V of the Illinois Public Aid Code, and for payments made to preserve the said lien in accordance with statutory provisions.

DATE: 7-8-08 Thomas Say

AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

State of Illinois

Illinois Dept. of Healthcare and Family Services

} ss

Bureau of Collections
Technical Recovery Section

County of Cook 32 West Randolph St., 13th Floor

Chicago, Illinois 60601-3412

I, ESEMBRO MAN, Notary Public do hereby certify that Thomas Sajdak, as an Authorized Representative of the Bureau of Collections, Technical Recovery Section in the Department of Healthcare and Family Services, 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
ESTELL HARDIMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:01/21/11

Given under my hand and seal this

day of ____

_, A.D., <u>@</u>

(Bublic

HFS 237 (R-10-2006)

IL478-0208