UNOFFICIAL COPY

STATE OF ILLINOIS

DEPARTMENT OF

HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN

[] INITIAL LIEN

[X] RENEWAL

0909033095

Doc#: 0909033095 Fee: \$38.00

Eugene "Gene" Moore

CASE ID #:

Cook County Recorder of Deeds
Date: 03/31/2009 11:05 AM Pg: 1 of 1

DATE OF INITIAL LIEN [11/22/1989]

Notice is hereby 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 Family Services, and my successors in office, hereby claim and intend to hold a lien on the following described real estate, to-wit:

Lot 5 and 6 in Block 7 in Croissant's Park, Markham 8th addition, a Subdivision in South 1/2 of Southwest 1/4 of Section 13. Township 36 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois and commonly known as 15711 Whipple, Markham, Illinois 60426.

P.I.N. 28-13-319-005-0000 & 28-13-319-006-0000

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

CLIENT NAME: MARIA FLORES

ADDRESS: , 15711 Whipple, Markham, IL 60426

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: 3-10-2009

AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTION

State of Illinois

County of Cook

Family Services
Bureau of Collections
Technical Recovery Section

32 West Randolph St., 13th Floor

Illinois Dept. of Healthcare and

Chicago, Illinois 60601-3412

I, Local Allow Allow Allow Public do hereby certify that Thomas Sajdak, as an Authorized Representative of the Bureau of Collections, 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 ____//

Notary Public

HFS 237 (R-10-2006) B

IL478-0208

P3-226-617243

Box 348