COLMECTIONS SECTION SE

CHICAGO IL 60603-2802

W/11/2016

4399612 309 NL

Doc#: 0926745038 Fee: \$38.00 Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 09/24/2009 08:47 AM Pg: 1 of 2

THREE GENERATIONS PAVING LLC

9205 S KEATING AVE STE 4
OAK LAWN

IL 60453-2583

09/14/2009 ACCOUNT NUMBER 439°612

DOCUMENT ID. 0593627712

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

PURSUANT to Section 2400 and 2401 of the Illinois Unemployment Insurance Act, as amended, notice is hereby given that there is due to the Director of Employment Security of the State of Illinois from the above named employer:

CONTRIBUTIONS and penalties, and interest on such unpaid contributions at the rate of 1% per month or 1/30 of 1% per day to 12/31/81, and at the rate of 2% per month or 12/365 of 2% per day from 01/01/82. (NOTE: Effective 01/01/88, payment received more than 30 days after the due date is deemed to have been received on the last day of the month preceding the month in which the payment was received).

QTR/YR	CONTRIBUTIONS	UNPAID PENALTIES	PLUS INTEREST ON CONTRIBUTIONS OTHER TO 09/30/2009
3/2008 4/2008	1,826.09 378.00	50.00 50.00	0.00 0.00 365.01 52.68
	2,204.09	100.00	0.00 417.69

THAT, by virtue of the above named sections, the amount of the aforesaid contributions, interest and penalties, together with such contributions, interest and penalties which may hereafter become due, are a lien in favor of the Director of Employment Security of the State of Illinois upon all the real and personal property or rights thereto owned or thereafter acquired by the aforementioned employer.

A remittance of \$2,721.78 (interest included) received on or before 09/30/2009, or a remittance of \$2,765.26 (interest included) on or before 10/31/2009 will clear these delinquencies in your account.

0926745038 Page: 2 of 2

9205 S KEATING AVE STE 4
OAK LAWN

IL 60453-2583

4399612 309 NE

ACCOUNT NUMBER 4399612

09/14/2009 DOCUMENT ID. 0593627712

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

Return the attached payment coupon with your remittance. Please include the document number (0593627712) and employer account number on your remittance.

Mail all other correspondence to:

Illinois Department of Employment Security Collections Section 33 S. State Street Chicago, II 50603

Director of Employment Security

Collection Manager (312) 793-1782

RECORD NO. _____ RECORD DATE _____ COUNTY CODE 31