UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

[832]3398]

NOTICE AND	CLAIM OF	LIEN
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[] INITIAL LIEN

[X] RENEWAL

Doc#: 1032133081 Fee: \$38.00

Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 11/17/2010 11:24 AM Pg: 1 of 1

DATE OF INITIAL LIEN [1/31/2006]

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

Lot 76 in Sheldon Heights Northwest Third Addition, a subdivision of the West Five Eights (5/8) of the East Half of the Southeast Quarter (except the South 174 feet thereof) in Section 17, Township 37 North, Range 14, East of the Thirl Principal Meridian in Cook County, Illinois. Commonly known as: 10954 South Peoria, Chicago, Illinois 60643 P.I.N. 25-17-429-038-0000

P.I.N. 25-17-429-038-0000	C
	94
A legal or equitable interest in sa	id described real estate is owned by:

CLIENT NAME: JAMES AUSTIN

CASE ID #: 91-200-849416

ADDRESS: Oak Forest Hospital, 15900 S. Cicero, Oak Fores:, ,L 60452

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.

statutory provisions.		
DATE: 11-15-2010	Thomas Saidak To	
AUTHORIZED R	EPRESENTATIVE, BUREAU OF COLLECTIONS	
	, Thinois Dept. of Healthcare and	
State of Illinois	Family Services Bureau of Collections SS Technical Recognity Section	
County of Cook	SS Technical Recovery Section 32 West Randolph St., 13th Floor Chicago, Illinois 60601-3412	
I, <u>ESTE HARDIMAN</u> , an Authorized Representative of the Bureau of	Notary Public do hereby certify that Thomas Sajdak, as 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
(SEAL)

Notary Public

HFS 237 (R-10-2006) B

IL478-0208