

UNOFFICIAL COPY

STATE OF ILLINOIS }
DEPARTMENT OF }
HEALTHCARE AND FAMILY SERVICES }
County of Cook }



Doc#: 1116604093 Fee: \$38.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 06/15/2011 11:08 AM Pg: 1 of 1

Notice Of Claim Upon Real Estate
By Virtue of [] 305 ILCS 5/3-9
 [X] 305 ILCS 5/5-13

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 as:

Lot 13 in James Frake's Addition to South Chicago, being a Subdivision of Lot 4 in the Circuit Court Partition of the East 1/2 of the East 1/2 of the Northeast 1/4 of the Northwest 1/4 of Section 17, Township 37 North, Range 15, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 10753 S. Avenue G, Chicago, Illinois 60617
P.I.N. 26-17-115-017-0000

THAT the assistance as checked above was awarded to:

CASE ID# : **91-218-823560**

CASE NAME: **CATHERINE MEDINA**

COUNTY OF RESIDENCE: **218**

from 10/25/1993 through 11/05/2010; inclusive, in the aggregate amount of \$13,451.29.

THAT no part of said Assistance has been repaid to the Claimant, either 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 \$13,451.29, the said amount being now due and owing to the claimant.

THAT said \$13,451.29, is hereby asserted by the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES as a claim upon the described real estate.

ILLINOIS DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES
Claimant

Illinois Dept. of Healthcare and
Family Services

Thomas Saloak
Authorized Representative

STATE OF ILLINOIS

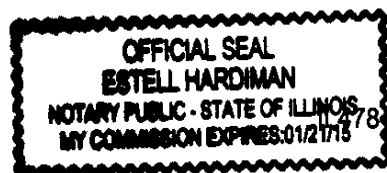
} Bureau of Collections
} Technical Recovery Section
} 32 West Randolph St., 13th Floor
} Chicago, Illinois 60601-3412 312-793-3529

COUNTY OF COOK

Thomas SALOAK, 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.

Estell Hardiman
Notary Public

Subscribed and sworn to before me this
10 day of June, A.D., 2011.
My commission expires 01/21/15



HFS 289 (R-4-99)