JNOFFICIAL COP

CCLLECTIONS SECTION 33 S STATE ST 10TH FLOOR ΙL CHICAGO

60603-2802

1121339159 Fee: \$38.00

Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 08/01/2011 11:38 AM Pg: 1 of 2

4222368 311 NL

CARCIA P C PONTIKES &

33 N LA SALLE ST STE 3350 60602-3394 ΙL **CHICAGO**

07/16/2011 ACCOUNT NUMBER 4222366

DOCUMENT ID. 0613025466

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. 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 | CONTRI BUTIONS | UNPAID PENALTIES | | ONTRIBUTIONS O 07/31/2011 |
|--------|----------------|------------------|------|---------------------------|
| 2/2010 | 3,480.00 | 70.00 | 0.00 | 764.26 |
| | 3,480.00 | 70.00 | 0.00 | 764.26 |

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 Illino upon all the real and personal property or rights thereto owned or p thereafter acquired by the aforementioned employer.

A remittance of \$4,314.26 (interest included) received on or before 07/31/2011, or a remittance of \$4,385.19 (interest included) on or before 08/31/2011 will clear these delinquencies in your account.

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FICIAL PONTIKES & GARCIA

33 N LA SALLE ST STE 3350 CHICAGO

60602-3394 IL



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NOTICE OF LIEN FOR CONTRIBUTIONS UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

Return the attached payment coupon with your remittance. Please include the document number (0613025466) and employer account number on your remittance.

Mail all other correspondence to:

Illinois Department of Employment Security Collections Section 33 S. State Street Chicago, IL 60603

Director of Employment Security

Collection Manager (312) 793-8333

COUNTY CODE 31 RECORD DATE RECORD NO.