

# UNOFFICIAL COPY

STATE OF ILLINOIS  
DEPARTMENT OF  
HEALTHCARE AND FAMILY SERVICES



NOTICE AND CLAIM OF LIEN

Doc#: 1207533077 Fee: \$40.00  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 03/15/2012 10:53 AM Pg: 1 of 2

INITIAL LIEN

RENEWAL

DATE OF INITIAL LIEN

[            ]

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 17 (except the North 25 feet thereof), all of Lot 18 and the North 10 feet of Lot 9 in Block 5 in Lansing Lake Gardens, a Subdivision of the Northeast 1/4 of the Northwest 1/4 (except the East 166.03 feet of the North 411 feet of the West 1/2 thereof) of Section 5, Township 35 North, Range 15, East of the Third Principal Meridian, recorded July 16, 1926 as Document No. 9341599 in Cook County, Illinois. Commonly known as: 18641 Williams Street, Lansing, Illinois 60438  
P.I.N. 33-05-103-047-0000

A legal or equitable interest in said described real estate is owned by CASE ID #: 93-226-H64004  
CLIENT NAME: BARBARA URTZ COUNTY OF RESIDENCE: 200  
ADDRESS: , 18620 Wentworth Avenue, Lansing, IL 60438-3501

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: 2/24/2012

Thomas Sajdak  
AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

State of Illinois }  
County of Cook } SS Illinois Dept. of Healthcare and  
Family Services  
Bureau of Collections 312-793-3529  
Technical Recovery Section  
32 West Randolph St., 13th Floor  
Chicago, Illinois 60601-3412

I, ESTELL HARDIMAN, Notary Public do hereby certify that Thomas Sajdak, as an Authorized Representative of the Bureau of Collections, Technical Recovery Section in the Department of Healthcare and Family Services, 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.



Given under my hand and seal this  
24 day of February, A.D., 2012  
Estell Hardiman  
Notary Public

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(Rev. 2/05/04) CCP 0216

Claim Order

## IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS COUNTY DEPARTMENT - PROBATE DIVISION

ESTATE OF

BARBARA URTZ,

DECEASED

No. 11 P 002259

AGREED

### CLAIM ORDER

This cause coming to be heard on the claim of Illinois Department of Healthcare and Family Services;  
IT IS HEREBY ORDERED that the claim be:

A. Allowed in the following class in the amount of: \$ 31,919.99\*

- Class 1 (4414)
- Class 2 (4415)
- Class 3 (4416)
- Class 4 (4417)
- Class 5 (4418) \* IDHFS SHALL FILE A
- Class 6 (4419) LITIG ON THE PROPERTY
- Class 7 (4420) LOCATED AT:

18641 WILLIAMS STREET,  
LANSING, ILLINOIS 60438  
TO SECURE THE CLAIM  
INTEREST.

B.  Set for trial \_\_\_\_\_  
\_\_\_\_\_ .m., Room \_\_\_\_\_

Richard J. Daley Center (4217)

C.  Continued to \_\_\_\_\_  
\_\_\_\_\_ a.m., Room \_\_\_\_\_

Richard J. Daley Center (6414)

D.  Dismissed for failure to appear (4313)

E.  Dismissed for \_\_\_\_\_ (4314)

F.  Denied upon trial (5414)

Atty. No.: 99003

Atty. Name: William O. Arnold

Firm Name: Illinois Attorney General

Attys. for: IDHFS

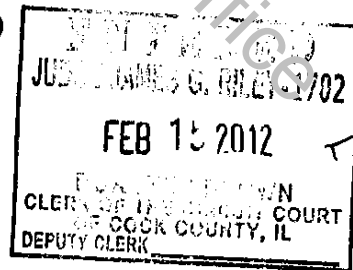
Address: 160 N. LaSalle, Suite N-1000

City/State/Zip: Chicago, IL 60601

Telephone: 312-793-2380

ENTERED:

Dated: \_\_\_\_\_



Judge

Judge's No.