

UNOFFICIAL COPY

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



Doc#: 1216733078 Fee: \$40.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 06/15/2012 11:11 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 31 in Maze's Addition to Chicago, being a Subdivision of the East 1/2 of the Northwest 1/4 of the Northeast 1/4 of Section 34, Township 39 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 3150 S. Karlov Ave., Chicago, Illinois 60623-4817

Renewal of Document # 0724226192, filed on 08/30/2007
P.I.N. 16-34-202-044-0000

THAT the assistance as checked above was awarded to:

CASE ID#: 91-200-883978

CASE NAME: GUADALUPE AVILA

COUNTY OF RESIDENCE: 200

from 10/29/2006 through 02/19/2007; inclusive, in the aggregate amount of \$12,777.98.

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 \$12,777.98, the said amount being now due and owing to the claimant.

THAT said \$12,777.98, 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
Bureau of Collections
Technical Recovery Section 312-793-3529
32 West Randolph St., 13th Floor
Chicago, Illinois 60601-3412

Thomas Saldak
Authorized Representative

STATE OF ILLINOIS

COUNTY OF COOK

THOMAS SALDAK, 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.

Estel Hardiman
Notary Public

Subscribed and sworn to before me this
12 day of June, A.D., 2012
My commission expires 01-21-15

