

Doc#: 1217948009 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 06/27/2012 12:09 PM Pg: 1 of 2

TITLE OF DOCUMENT

THIS INSTRUMENT WAS PREPARED BY:

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NOTICE OF FEDERAL INTEREST

On April 24, 2012, the Health Resources and Services Administration's Bureau of Primary Health Care awarded Grant No. C8BCS23908 to PCC Community Wellness Center. The grant provides funds for the renovation of a building located at 14 Lake Street, Oak Park, Illinois which is located on the property described below in Cook County, State of Illinois.

The following is a description of the property/land that includes certain parcels or parcels of land located in the City of Chicago, County of Cook, State of Illinois, more particularly described as follows:

Parcel 1:

LOTS 16 IN BLOCK 36 IN RIDGELAND, BEING A SUBDIVISION OF THE EAST ½ OF THE EAST ½ S ECTION 7, AND THE NORTHWEST 1/4/ AND THE WEST ½ OF THE WEST 1/2 OF THE SOUTH WEST 1/4 SECTION 8, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Parcel 2:

THE EAST 24.00 FEET OF LOT 17 IN BLOCK 36 IN RIDGELAND, BEING A SUBDIVISION OF THE EAST ½ OF THE EAST ½ SECTION 7 AND THE NORTHWEST ¼ AND THE WEST 1/2 OF THE WEST 1/2 OF THE SOUTHWEST QUARTER OF SECTION 8, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERDIAN, IN COOK COUNTY, ILLINOIS.

Address:

14 Lake Street, Oak Park, Illinois

Permanent Index Number:

16-08-123-021-0500 16-08-123-022-0000

The Notice of Grant Award for this grant includes conditions on use of the aforementioned property and provides for a continuing Federal interest in the property. Specifically, the property may not be (1) used for any purpose inconsistent with the statute and any program regulations governing the award under which the property was acquired; (2) mortgaged or otherwise used as collateral without the written permission of the Office of Federal Assistance Management (OFAM), Health Resources and Services Administration (HRSA), or designee; or (3) sold or transferred to another party without the written rermission of the Office of Federal Assistance Management (OFAM), Health Resources and Services Auministration (HRSA), or designee. These conditions are in accordance with the statutory provisions set forth in the American Recovery and Reinvestment Act, Title 45 CFR part 74 or 92 as applicable, the HES Grants Policy Statement, and other terms and conditions of award.

These grant conditions and requirements cannot be nullified or voided through a transfer of ownership. Therefore, advance notice of any proposed change in usage or ownership must be provided to the Associate Administrator, QFAM, HRSA.

Signature: YA

Typed Name: Robert

Title: President & CEO

Date: 6-26-12

LYNN M. HOPKINS OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires

7 -W. N. 6/21/12