COLLECTIONS SECTION OFFICIAL COPY

33 S STATE ST 10TH FLOOR

CHICAGO

CHI CAGO

IL 60603-2802

Doc#: 1302510078 Fee: \$40.00 Karen A. Yarbrough

Cook County Recorder of Deeds Date: 01/25/2013 11:33 AM Pg: 1 of 2



LAVANCE FOLLON LA PLUMBING 7219 S PRINCETON AVE UNIT 1A IL60621-3537

01/13/2013 ACCOUNT NUMBER 4600193

DOCUMENT ID. 0631018474

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	CONTRIBUTIONS	PENALTIES	OTHER	PLUS INTEREST ON CONTRIBUTIONS TO 01/31/2013
2/2011 3/2011 4/2011	4,405.61 4,118.55 3,869.54	120.00 110.00 110.00	0.00 0.00 0.00	503.47 1,156.34 852.38
	12,393.70	340.00	0.00	3.512.19

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

A remittance of \$16,245.89 (interest included) received on or before 01/31/2013, or a remittance of \$16,498.52 (interest included) on or before 02/28/2013 will clear these delinquencies in your account.

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LAVANCE FULTON LA PLUMBING 7219 S PRINCETON AVE UNIT 1A 60621-3537 ΙL **CHICAGO**

ACCOUNT NUMBER 4608193

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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 (0631018474) 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 50603

Director of Employment Security

Collection Manager

Directo.

Collection Mana (312) 793-8333

RECORD NO	,	RECORD	DATE	 COUNTY	CODE	3]