UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN

[X] INITIAL LIEN
[] RENEWAL

TS1 0233072

Doc#: _1310233072 Fee: \$40.00

Affidavit Fee: Karen A.Yarbrough

Cook County Recorder of Deeds
Date: 04/12/2013 10:39 AM Pg: 1 of 1

DATE OF INITIAL LIEN

Notice is hereby given that I, George Luetkemeyer, acting in my official capacity as an Authorized Representative of the Bureau of Collections, Technical Recovery Section in the Department of Healthcare and Fa nily Services, and my successors in office, hereby claim and intend to hold a lien on the following described real estate, to-wit:

Lot 7 (except the North 10 lest thereof) and Lot 8 in Block 5 in East Washington Heights, being a Subdivision of the West 1/2 of the Northwest 1/4 and the Southwest 1/4 of Section 9, Township 37 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 9616 S. Emerald, Chicago, Illinois 60628 P.I.N. 25-09-108-077-0000

04,

A legal or equitable interest in said described real estate is owned by CASE ID #: 91-200-902881

CLIENT NAME: WILLIE MAE GREER

ADDRESS: Renaissance, 2425 E 71st Street, Chicago, IL 606/9

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.

AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

State of Illinois

} } SS Healthcare and Family Services
Collections/Technical Recovery
Prepared by/Contact/Return to: 312-793 3529

Prepared by/Contact/Return to: 312-793 401 S. Clinton - 5th Floor Chicago, IL 60607-3800

County of Cook

Notary Public do hereby certify that George Luetkemeyer, 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.

OFFICIAL SEAL ESTELL HARDIMAN NOTARY FUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:01/21/15 Given under my hand and seal Mis

Z day or

Notary Public

HFS 237 (R-10-2006)

IL478-0208