UNOFFICIAL CO

STATE OF ILLINOIS **DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES**

NOTICE AND CLAIM OF LIEN

[X] INITIAL LIEN [] RENEWAL

DATE OF INITIAL LIEN

1313604072 Fee: \$40.00 Affidavit Fee:

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 05/16/2013 11:10 AM Pg: 1 of 1

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 Family Services, and my successors in office, hereby claim and intend to hold a lien on the following describe 1 real estate, to-wit:

LOT 92 IN MILLS AND SOND MEADOWCREEK, A SUBDIVISION OF THE SOUTH 3/8THS OF THE EAST HALF OF THE NORTHEAST QUARTER AND THAT PART OF THE EAST HALF OF THE SOUTHEAST QUARTER (EXCEPT THE WEST HALF OF THE WEST HALF THEREOF) LYING NORTH OF LAKE STREET ALL IN SECTION 5, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYIN 3 NORTH OF THE INDIAN BOUNDARY LINE, IN COOK COUNTY, ILLINOIS. SITUATED IN THE COUNTY OF COOK, IN THE STATE OF ILLINOIS.

PROPERTY ADDRESS: 1607 N 43RD AVE, 57 ONE PARK, IL 60165

PIN: 15-05-210-016-0000

A legal or equitable interest in said described real estate is owned by CASE ID #: 93-030-144272

CLIENT NAME: FRANCISCO GOMEZ

COUNTY OF RESIDENCE: 030

ADDRESS: Manor Care, 512 E Ogden Ave, Westmont, IL 60559

This lien is claimed for all assistance paid to or on behalf of said clien, 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.

COLLECTIONS SĦNTATIVE. BURE*M*U

State of Illinois

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Healthcare and Family Services Collections/Technical Recovery Prepared by/Contact/Return to:

Attn: Charlene Elwood 630-530-5961

146 West Roosevelt Road Villa Park, IL, 60181

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

day of

that she/he signed the said instrument as required by law, for the uses therein set forth.

OFFICIAL SEAL **ESTELL HARDIMAN** NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:01/21/15

Given under my hand and seal this

HFS 237 (R-10-2006)

IL478-0208