UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN

[X] INITIAL LIEN

[]RENEWAL

[3]°33325Z

Doc#: 1319333062 Fee: \$40.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 07/12/2013 11:11 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 Family Services, and my successors in office, hereby claim and intend to hold a lien on the following describe of eal estate, to-wit:

Lot 84 in Dr. Prices River Park Subdivision of the West 3/4 of the Northwest 1/4 of the Southeast 1/4 of Section 10, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 5148 North Kildare, Chicago, Illinois 60630 P.I.N. 13-10-401-024-0000

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A legal or equitable interest in said described real estate is owned by CASE ID #: 91-200-B08075

CLIENT NAME: ANN FOLEY

ADDRESS: Nazarethville Retirement, 300 N River Road, Des Plaines, IL 60016

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.

DATE: 7-11-20/3

AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

State of Illinois

County of Cook

Healthcare and Family Services
Collections/Technical Recovery
Prepared by/Contact/Return to: 312-797 3529

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

I, A ROLL 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.

SS

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

Given under my hand and saal this

__ day of

A.D., LOC

HFS 237 (R-10-2006)

IL478-0208