UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN

[X] INITIAL LIEN
[] RENEWAL

1401742834

Doc#: 1401742034 Fee: \$40.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 01/17/2014 10:45 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 ice 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 described regisestate, to-wit:

LOT 1 IN GABRIEL'S SUBDIVISION OF PART OF THE EAST HALF OF THE SOUTHEAST QUARTER OF SECTION 18, TOWNSHIP 42 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, VINNOIS.

Situated in the Counth of Cook, State of Illinois.

Property address: 2008 N Chestnut Ave, Arlington Heights, IL 60004

PIN: 03-18-415-007

A legal or equitable interest in said described real estate is council by CASE ID #: 91-057-083231

CLIENT NAME: DOROTHY GABRIEL

COUNTY OF RESIDENCE: 057

ADDRESS: Arlington Rehab & Living, 1666 Checker Rd, Long G eve, IL 60047

This lien is claimed for all assistance paid to or on behalf of said clier t, ur der 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: 1-16-2014

ALITHORIZED REPRESENTATIVE BUREAU OF COLLECTIONS

State of Illinois

County of Cook

SS

Healthcare and Family Services
Collections/Technical Recovery
Prepared by/Contact/Return to:
Attn: Stephen Dadzie 847-336-4067

Attn: Stephen Dadzie 847-336 3235 Belvidere Road Park City, IL, 60085

I, ESIE HARDIMAN, 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 PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:01/21/15

Given under my hand and seal this

day of Sangery, A.D., de

Notary Public

HFS 237 (R-10-2006)

IL478-0208