UNOFFICIAL CC

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

NOTICE AND CLAIM OF LIEN

Doc#: 1407341034 Fee: \$40.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 03/14/2014 10:40 AM Pg: 1 of 1

[X] INITIAL LIEN [] RENEWAL

DATE OF INITIAL LIEN

Notice is hereby given that I, George Luetkemeyer, acting in my official capacity as an Authorized Representative of the Su eau 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 real estate, to-wit:

Unit 1-404 together with its und viced percentage interest in the common elements in Towne Square of Skokie Condominium as delineated and defined in the Declaration recorded as Document Number 97330041, in the South 105 acres of the Southeast quarter of Section 21, Township 41 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois.Commonly known as: 5000 Oakton Street, Unit 1-404, Skokie, Illinois 60077 P.I.N. 10-21-414-082-1054

A legal or equitable interest in said described real estate is owned b CASE ID #: 91-200-992344 COUNTY OF RESIDENCE CLIENT NAME: ALFRED NATHAN

ADDRESS: Lieberman Center / Health, 9700 Gross Point Road, Skukie, IL 60076

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.

State of Illinois

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Collections/Technical Recovery Prepared by/Contact/Return to: 312-793-3529

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

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

Given under my hand and seal this

day of

Notary Public

HFS 237 (R-10-2006)

IL478-0208