UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY

NOTICE AND CLAIM OF LIEN

[ ] INITIAL LIEN

[X] RENEWAL

Doc#: 1422612153 Fee: \$40.00 Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 08/14/2014 11:35 AM Pg: 1 of 1

DATE OF INITIAL LIEN [6/12/1990]

Notice is necroy 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 described real estate, to-wit:

Lot 23 in J. W. Cochrans Subdivision of the North part of Block 20 of Canal Trustee's Subdivision of Section 7, Township 39 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 1907 West Ohio, Chicago, Illinois 60622. P.I.N. 17-07-216-022-0000.

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	C				
A legal or equitable interest in said described	d real et tat	e is owned by	CASE ID#	<u>03-228-283</u>	<u>529</u>
CLIENT NAME: HILDA RIVERA		42	COUNTY OF	RES:	<u>228</u>
ADDRESS: , 1907 West Ohio, Chicago, IL	60622	1/x,			
This lien is claimed for all assistance paid to or on behalf of seta 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: 8-4-2014 Suttlesing!					
AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS					
State of Illinois	} } } SS	Healthcare and Fa Collections/Techn Prepared by/Conta 401 S. Clinton - 5	ical Recovery act/Return to: 31	12-793: (529	
County of Cook	}	Chicago, IL 6060	7-3800	CO	
I, Sold A Motary Public do hereby certify that George Luetkemeyer, as an Authorized Representative of the Bureau of Collections, 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 sig therein set forth.	ned the sai	d instrument a	s required by I	aw, for the us	es

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

Notary Public

Given under my hand and seal th

HFS 237 (R-10-2006) B

IL478-0208