## **UNOFFICIAL COPY**

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

CERTIFICATE OF RELEASE OF LIEN

FOR: MEDICAL AND/OR CASH ASSISTANCE



Doc#: 1431742104 Fee: \$40.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 11/13/2014 11:15 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, for and in consideration of \$0.00, do hereby release the lien for medical and/or cash assistance, which was paid to or on behalf of:

CASE NAME: JOHN P KAR & S

CASE ID#: 91-200-B19646

COUNTY OF RESIDENCE: 200

Dated 08/27/2014, and recorded in, Cook County, State of Illinois, on 09/12/2014, under Document No. 1425504072 against the following described real property:

Lot 22 in Block 2 in Little Creek Unit one, a Subdivision of part of Lots 1 and 2 in County Clerk's Division of Section 21, Township 41 North, Range 9, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 513 Littlecreek, Streamwood, Illinois 60107 P.I.N. 06-21-207-022-0000

P.I.N. 06-21-207-022-0000	COUNTY CO
Dated 11-6-2014 AUTHORIZED	DOGU Duetherneur DREPRESENTATIVE, BUREAU OF CULLECTIONS
State of Illinois } Scounty of Cook }	Healthcare and Family Services Collections/Technical Recovery Prepared by/Contact/Return to: 312-793-3529 401 S. Clinton - 5th Floor Chicago, IL 60607-3800
as an Authorized Representative of the Burea Department of Healthcare and Family Service	, Notary Public do hereby certify that George Luetkemeyer, au of Collections, Technical Recovery Section in the es, personally known to be the same person whose name is ared before me this day in person and acknowledged that d by law, for the uses therein set forth.

Given under my hand and seal thi

**Notary Public** 

HFS 233 (R-10-2006)

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

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IL478-2317