UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

CERTIFICATE OF
RELEASE OF LIEN

1431742107

Doc#: 1431742107 Fee: $40.00
Karen A.Yarbrough
Cook County Recorder of Deeds
Date: 11/13/2014 11:18 AM Pg: 1 of 1

FOR: MEDICAL AND/OR
CASH ASSISTANCE

Property of Cook County Clerk's Office

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 $30,529.30, do hereby release the lien for medical and/or cash assistance, which was paid to or on behalf of:

CASE NAME: **ILEENE SCHABES**

CASE ID# : **91-200-B19435**

COUNTY OF RESIDENCE: **200**

Dated 03/12/2014, and recorded in, Cook County, State of Illinois, on 04/14/2014, under Document No. 1410419044 against the following described real property.

The validity of this release is contingent upon the check clearing the bank.

The South 80 feet of Lot 32 in Frederick H. Bartlett's 87th Street Orchard Farms being a Subdivision of the Southeast 1/4 of the Southwest 1/4 (except the East 1/2 of the Southeast 1/4 of said Southeast 1/4 of the Southwest 1/4 and except the West 1/2 of the Southwest 1/4 of said Southeast 1/4 of the Southwest 1/4 of Section 33, Township 38 North, Range 13 East of the Third Principal Meridian, according to the plat thereof recorded February 25, 1941 as Document 12629627 in Cook County, Illinois. Commonly known as: 8538 S. Lockwood Avenue, Burbank, Illinois 60459
P.I.N. 19-33-307-013-0000

Dated 10/21/14 George Luetkemeyer
AUTHORIZED REPRESENTATIVE/BUREAU OF COLLECTIONS

State of Illinois } SS
County 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

I, ESTELL 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
(SEAL)

Given under my hand and seal this 21 day of October, A.D., 2014

Estell Hardiman
Notary Public

HFS 233 (R-10-2006) IL478-2317

Box 348