UNOFFICIAL COP

STATE OF ILLINOIS **DEPARTMENT OF**

HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN

[] INITIAL LIEN

[X] RENEWAL



1431742131 Fee: \$40.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 11/13/2014 11:29 AM Pg: 1 of 1

DATE OF INITIAL LIEN [6/16/1995]

Notice is hereby given that I. George Luetkemeyer, acting in my official capacity as an Authorized Representative of the Pureau 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 43 in the Resubdivision of Plock 3 in the Subdivision of the South 1/2 of Section 10, Township 39 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois and commonly known as 4212 West Carroll, Chicago, IL 6032/...

-004

P.I.N. 16-10-401-037-0000

A legal or equitable interest in said described real estate is cwred by:

CASE ID #: 03-215-583683 COUNTY OF RES: 215

CLIENT NAME: WILLIE MAE HOPKINS

ADDRESS: , 4212 West Carroll, Chicago, IL 60624

This lien/renewal is claimed for all Aid to the Aged, Blind or Disabled (A ABL) assistance paid by HFS for any applicable cash assistance paid, under Article III of the Illinois Public Aid Code, and/or any applicable amount of medical assistance paid out on your behalf under Article V of the Illinois Public Aid Code if/while you reside/resided in the community or in a medical institution, ragardless of any assigned case identification number.

State of Illinois

Healthcare and Family Services 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, 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.

SS

OFFICIAL SEAL ESTELL HARDMAN NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES.01/21/15 **~~√654Ŀ**}~~~

Given/under my har

HFS 237 (R-10-2006) B

IL478-0208