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Doc#: 1504810071 Fee: \$40.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 02/17/2015 12:08 PM Pg: 1 of 1

STATE OF ILLINOIS }
DEPARTMENT OF }
HEALTHCARE AND FAMILY SERVICES }
County of Cook }

Notice Of Claim Upon Real Estate
By Virtue of [] 305 ILCS 5/3-9
[X] 305 ILCS 5/5-13

FOR: [X] MEDICAL ASSISTANCE
[] BLIND ASSISTANCE
[] AGED ASSISTANCE
[] DISABILITY ASSISTANCE

NOTICE IS HEREBY GIVEN:

That the Illinois Department of Healthcare and Family Services asserts a claim upon the premises legally described as:

Lot 2 in Whitehead Brothers Resubdivision of Lot 53 in Frederick H. Bartlett's 87th Street Homesteads Subdivision of the West 1/2 of the Southeast 1/4 of Section 32, Township 38 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 8330 S. Mansfield Ave., Burbank, Illinois 60459

Renewal of Document # 1007433107, filed on 03/15/2010
P.I.N. 19-32-419-040-0000

THAT the assistance as checked above was awarded to:

CASE ID# : 91-200-906753

CASE NAME: WALTER GRABOWSKI

COUNTY OF RESIDENCE: 200

from 07/02/2008 through 09/24/2009; inclusive, in the aggregate amount of \$21,306.11.

THAT no part of said Assistance has been repaid to the Claimant, either by the recipient, their heirs, devisees, legatees, or by any other person(s) on behalf of the estate.

THAT the amount claimant demands for said Assistance is \$21,306.11, the said amount being now due and owing to the claimant.

THAT said \$21,306.11, is hereby asserted by the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES as a claim upon the described real estate.

ILLINOIS DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES
Claimant

By Georg Laettkemper
Authorized Representative

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

Georg Laettkemper

, being first duly sworn upon oath, deposes and says that they are an authorized agent and representative of the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES, in and for the County of Cook, and claimant in the foregoing claim, that he has read the same, knows the contents thereof, and believes the same to be true.

Estell Hardiman
Notary Public

Subscribed and sworn to before me this
21 day of January, A.D., 2015
My commission expires 01-21-19

HFS 289 (R-4-99)

Box 348



NOTARY PUBLIC - STATE OF ILLINOIS 317
MY COMMISSION EXPIRES 01/21/19