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STATE OF ILLINOIS **DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES** Doc#: 1504810032 Fee: \$40.00 County of Cook Karen A. Yarbrough Cook County Recorder of Deeds Notice Of Claim Upon Real Estate Date: 02/17/2015 11:44 AM Pg: 1 of 1 By Virtue of [] 305 ILCS 5/3-9 [X] 305 ILCS 5/5-13 FOR: IXI 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 The North 1/2 of the South 40 feet of the East 152 feet of Lot 3, in Block 3 in Cleaverville Addition, a Subdivision of that part of the North 1/2 of the Northeast 1/4, lying East of Vincennes Road of Section 3, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 3966 S. Langley Ave., chicago, Illinois 60653 Co0+ Co4, P.I.N. 20-03-207-017-0000 CASE ID#: 91-212-942345 THAT the assistance as checked above was awarded to: COUNTY OF RESIDENCE: 200 CASE NAME: ELMO TRIBUE from 03/08/2011 through 10/01/2014; inclusive, in the aggregate amount of \$6,018.59. 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 \$6,018.59, the said airrant being now due and owing to the claimant. THAT said \$6,018.59, 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 FAMIL' Representative Healthcare and Family Services STATE OF ILLINOIS Collections/Technical Recovery Prepared by/Contact/Return to: 312-793-3529 401 S. Clinton - 5th Floor COUNTY OF COOK Chicago, IL 60607-3800 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. Subscribed and sworn to before me this **39** day of

Box 348

HFS 289 (R-4-99)

ESTELL HARDIMAN

NOTARY PUBLIC - STATE OF ILLINOB-281

MY COMMISSION EXPIRES:01/21/19

OFFICIAL SEAL