

UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE & FAMILY SERVICES

NOTICE AND CLAIM OF LIEN



INITIAL LIEN
 RENEWAL

Doc#: 1522642030 Fee: \$40.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 08/14/2015 11:13 AM Pg: 1 of 1

DATE OF INITIAL LIEN

[]

Notice is hereby given that I, Estell Hardiman, 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, and my successors in office, hereby claim and intend to hold a lien on the following described real estate, to-wit:

Lot 80 (except the South 30 feet thereof) in Heafield's Lawrence Avenue terminal Gardens Subdivision of the Northwest 1/4 of Section 17, Township 40 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 4587 N. Melvina Ave., Chicago, Illinois 60630
P.I.N. 13-17-112-048-0000

A legal or equitable interest in said described real estate is owned by: **CASE ID # : 91-200-FC4332**
CLIENT NAME: **MARY BARAN** COUNTY OF RESIDENCE: **200**
ADDRESS: Regency Rehab. Center, 6631 N. Milwaukee Ave, Niles, IL 60648-4492

This lien/renewal is claimed for all Aid to the Aged, Blind or Disabled (AABD) 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, regardless of any assigned case identification number.

DATE: 8-04-2015
Estell Hardiman
AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

State of Illinois }
County of Cook } SS 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, Beverly Adams, Notary Public do hereby certify that Estell Hardiman, 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.

Given under my hand and seal this
4th day of August, A.D., 2015
Beverly Adams
Notary Public

