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Cook County Recorder of Deeds

Karen A. Yarbrough

Doc#: 1610610134 Fee: \$40.00

Date: 04/15/2016 11:37 AM 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

[] D SABILITY ASSISTANCE

NOTICE IS HEREBY GIVEN:

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

Lot 3 in Resubdivision of Lot 13. 14, 15 and the South 2 feet of Lot 16 (except the West 55 feet of said Lots) in Block 2 in the Resubdivision of the East 1/2 of the Southeast 1/4 of Section 21, Township 38 North, Range 14, East of the Third Principal Meridian, ir C/c'. County, Illinois. Commonly known as: 154 W. 70th Street, Chicago, Illinois 60621

P.I.N. 20-21-415-017-0000

THAT the assistance as checked above was awarded to:

CASE NAME: MANSFIELD PERKINS

CASE ID#: 91-202-000FE0955 COUNTY OF RESIDENCE: 200

from 09/01/2005 through 12/17/2015; inclusive, in the aggregate amount of \$1,606.33.

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 \$1,606.33, the said amount being now due and owing to the claimant.

THAT said \$1,606.33, is hereby asserted by the ILLINOIS DEPARTMENT OF INSALTHCARE AND FAMILY SERVICES as a claim upon the described real estate.

ILLINOIS DEPARTMENT OF

HEALTHCARE AND FAMILY SERVICES

Claimant

authorized Representative

STATE OF ILLINOIS

Healthcare and Family Services Collections/Technical Recovery Prepared by/Contact/Return to: 312-793-3529

COUNTY OF COOK

401 S. Clinton - 5th Floor

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 2200 day of mark CH

2 242 day of _ My commission expires 111091 A.D.. 201ん

HFS 289 (R-4-99)

OFFICIAL SEAL BESSIE R MANUEL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 11/09/16

IL478-2317