UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE & FAMILY SERVICES

CERTIFICATE OF RELEASE OF LIEN



Doc#: 1613942060 Fee: \$40.00

Karen A.Yarbrough

Cook County Recorder of Deeds
Date: 05/18/2016 11:52 AM Pg: 1 of 1

FOR: MEDICAL AND/OR CASH ASSISTANCE

Notice is hereby giver that I, Estell Hardiman, acting in my official capacity as an Authorized Representative of the buler of Collections, Technical Recovery Section in the Department of Healthcare and Family Selvices, for and in consideration of \$0.00, do hereby release the lien for medical and/or cash assistance. which was paid to or on behalf of:

CASE NAME: THELMA FANNIE!

CASE ID#: <u>91-200-000952804</u>
COUNTY OF RESIDENCE: <u>200</u>

Dated 06/14/2011, and recorded in, Cock County, State of Illinois, on 06/30/2011, under Document No. 1118126112 against the following describe 1 mail property:

PARCEL 1: Unit C-1/105 in the Ford City Condominium as delineated on a survey of the following described real estate: appurtenant to said unit in part of the North 3/4 of Section 27, Township 38 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois, which survey is attached as Exhibit "A" to Declaration of Condominium recorded as Cocument No. 24911808 together with their respective undivided percentage interest in the common elements

PARCEL 2: Easement appurtenant to and for the benefit of Parcel 1 for ingress and egress as set forth in the Declaration of Easements recorded as Document 24748/.16 and created by Deed from American National Bank and Trust Company of Chicago, as Trustee under Trust Agreement Dated October 10, 1978 and known as Trust No. 45058 to Mary P. Shumake Recorded as Document No. 24981962.

Commonly known as: 4351 W. 76th Street, Chicago, Illinois 60652 FUN. 19-27-401-038-1234

Dated 4/38-2016

AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

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

I, BESSEE R. MANUEL, 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.

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

HFS 233 (R-10-2006)

Given under my hand and seal this

28-44 day of 3 R Z L , A.D., 2016

Notary Public _____

IL478-2317