UNOFFICIAL COPY

STATE OF ILLINOIS DEPARTMENT OF **HEALTHCARE AND FAMILY SERVICES**

NOTICE AND CLAIM OF LIEN

[] INITIAL LIEN

[X] RENEWAL



Doc#: 1616842083 Fee: \$40.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 06/16/2016 11:40 AM Pg: 1 of 1

DATE OF INITIAL LIEN [3/12/1992]

Notice is hereby gir en that I, Estell Hardiman, acting in my official capacity as an Authorized Representative of the Sureau of Collections, Technical Recovery Section in the Department of Healthcare and Family survices, and my successors in office, hereby claim and intend to hold a lien on the following described real astate, to-wit:

West Lot 47, Block 7, in C.G. Campbell Subdivision of the East 1/4 of the Northeast 1/4 of Section 9, Township 39, Range 13, and the South 1/2 of the Southeast 1/4 of the Southeast 1/4 of Section 4, Township 39 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as 4906 W. Huron, Chicago, Illing is £0644-1333.

P.I.N. 16-09-206-048-0000

A legal or equitable interest in said described real estate is owned by: CASE ID #: P3-234-000695166 COUNTY OF RES: **234** CLIENT NAME: LILLIAN KING

ADDRESS: , 4906 W. Huron, Chicago, IL 60644-1333

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

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

County of Cook

WE Notary Public do hereby certify that Estell Hardiman, as ESS ZÊ an Authorized Representative of the Bureau of Collections, 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.

SS

OFFICIAL SEAL BESSIE R MANUEL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:11/09/16(8<u>EAL</u>4^

HFS 237 (R-10-2006) B

Given under my hand and seal this

20 day of

Notary Public

IL478-0208