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STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

NOTICE AND CLAIM OF LIEN Doc# 1704704116 Fee \$40.00 [] INITIAL LIEN [X] RENEWAL KAREN A.YARBROUGH COOK COUNTY RECORDER OF DEEDS DATE: 02/16/2017 12:17 PM PG: 1 OF 1 DATE OF INITIAL LIEN [10/23/1987] Notice is hereby citien 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 astate, to-wit: Parcel 33, Lots 23 and 24 in Blr.3k 7 in Chase and Dyers Subdivision part of the Southwest 1/4 of the Northwest 1/4 of Section 7, Township 36 North, Range 14, East of the Third Principal Meridian in Cook County, Illinois and commonly known as 2247 Joliet Street, Dixmoor, Illinois 60426-1038. P.I.N. 29-07-139-050-0000 004 A legal or equitable interest in said described real estate is owned by: CASE ID #: 03-226-000539440 COUNTY OF RES: CLIENT NAME: LOLA WILLIS 226 ADDRESS: , 2247 Joliet Street, Dixmoor, IL 60426-1038 This lien/renewal is claimed for all Aid to the Aged, Blind or Disabled (AAGD) 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 Articia / 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. REPRESENTATIVE, BUREAU OF COLLECTIONS Healthcare and Family Services Collections/Technical Recovery State of Illinois Prepared by/Contact/Return to: 312-793-3529 SS 401 S. Clinton - 5th Floor Chicago, IL 60607-3800 County of Cook , Notary Public do hereby certify that Estell Hardiman, as 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.

OFFICIAL SEAL
BEVERLY ADAMS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:06/21/20

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Given under my hand and seal this

- day of Februar

, A.D., <u>20/7</u>

Notary Public

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