

UNOFFICIAL COPY

STATE OF ILLINOIS }
DEPARTMENT OF }
HEALTHCARE AND FAMILY SERVICES }
County of Cook }



Doc# 1704704120 Fee \$40.00

Notice Of Claim Upon Real Estate
By Virtue of [] 305 ILCS 5/3-9
 [X] 305 ILCS 5/5-13

KAREN A. YARBROUGH
COOK COUNTY RECORDER OF DEEDS
DATE: 02/16/2017 12:21 PM PG: 1 OF 1

FOR: [X] MEDICAL ASSISTANCE
 [] BLIND ASSISTANCE
 [] AGED ASSISTANCE
 [] DISABILITY ASSISTANCE

NOTICE IS HEREBY GIVEN:

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

Lot 11 in Arthur T. McInnes & Company's first addition to State Street farms, being a subdivision of all that part of the Northeast Quarter of Section 33 (except the North 100.28 acres thereof) that lies East of the Easterly right of way of Chicago Southern Railroad together with all that part of the East half of the South East Quarter of said Section 33 that lies East of the Easterly line of right of way of said Chicago Southern Railroad in Township 35 North, Range 14, East of the Third Principal Meridian, as recorded March 23, 1942 as Document No. 12860961 in Cook County, Illinois. Commonly known as: 133 E. 34th Street, Steger, Illinois 60475-5545
Renewal of Document # 0716641084, filed 06/15/2007, Renewal of Document # 1210433133 filed 04/13/2012
P.I.N. 32-33-202-001-0000

THAT the assistance as checked above was awarded to: **CASE ID#: 91-200-000695813**
CASE NAME: MILDRED HENSLEY COUNTY OF RESIDENCE: **200**

from 04/01/2003 through 05/11/2006; inclusive, in the aggregate amount of \$3,746.98.

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 \$3,746.98, the said amount being now due and owing to the claimant.

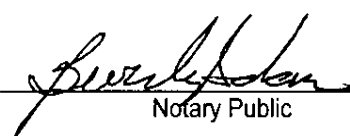
THAT said \$3,746.98, is hereby asserted by the ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES as a claim upon the described real estate.

ILLINOIS DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES
Claimant

By 
Authorized Representative

STATE OF ILLINOIS } Healthcare and Family Services
 } Collections/Technical Recovery
COUNTY OF COOK } Prepared by/Contact/Return to: 312-793-3529
 } 401 S. Clinton - 5th Floor
 } Chicago, IL 60607-3800

ESTELLE HARDIMAN, 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.


Notary Public

Subscribed and sworn to before me this
2 day of FEBRUARY, A.D., 2017.
My commission expires 6-21-20

HFS 289 (R-4-99)

Box 348

