UNOFFICIAL COPY

STATE OF ILLINOIS
DEPARTMENT OF
HEALTHCARE AND FAMILY SERVICES

≈1716701038*

NOTICE AND CLAIM OF LIEN

[] INITIAL LIEN

[X] RENEWAL

Doc# 1716701038 Fee \$40.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 06/16/2017 11:48 AM PG: 1 OF 1

DATE OF INITIAL LIEN [2/27/1998]

Notice is heleby given 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 estate, to-wit:

Lot 59 in the Third Unit of 7 or pfer's Thornwood Subdivision of part of the Southeast 1/4 Section 27, Township 36 North, Range 1/2. East of the Third Principal Meridian in Cook County, Illinois. Commonly known as: 13 Arapaho Drive, Thornton, Illinois 60476-1122 P.I.N. 29-27-408-007-0000

A legal or equitable interest in said described real estate is cwned by: CASE ID #: 91-200-000699797

CLIENT NAME: GLADYS EVANS

COUNTY OF RES: 200

ADDRESS: Glenshire NSG Rehab Ctr, 22660 S. Cicero, Richtor, Park, IL 60471-1700

-004

This lien/renewal is claimed for all Aid to the Aged, Blind or Disabled (AARD) 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 A. ico V 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.

DATE: 6/07/2017 AUTHORIZED REPRESENTATIVE, BUREAU OF COLLECTIONS

State of Illinois

County of Cook

SS

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, DESSE K. MANGE L, 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 subscibed 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:01/05/21

HFS 237 (R-10-2006) B

Given under my hand and seal this

775 day of To

, A.E

A.D., **201**

Notary Publi

IL478-0208