UNOFFICIAL

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

NOTICE AND CLAIM OF LIEN

[] INITIAL LIEN [X] RENEWAL

Doc# 1801704047 Fee \$40,00

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 01/17/2018 11:23 AM PG: 1 OF 1

DATE OF INITIAL LIEN [6/30/2003]

Notice is hereby 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 restrate, to-wit:

Lot 8 in Drew's Subdivision, being a Subdivision in the North West Quarter of Section 6, Township 35 North, Range 14, East of the Third Principal Meridian, according to the plat recorded as Document 14778733, in Cook County, Illinois. Commonly known as 18429 Dixie Hwy, Homewood, Illinois 60430. P.I.N. 32-06-225-005-0000.

-004

A legal or equitable interest in said described real estate is owned by: CASE ID #: 91-200-000777601 COUNTY OF RES: CLIENT NAME: SYLVIA GORSZCZYK 200

ADDRESS: Applewood Nsg & Rehab Ctr, 21020 S. Kostner Ave., Watteson, IL 60443-2068

This lien/renewal is claimed for all Aid to the Aged, Blind or Disabled (AABC) 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.

DATE: 01

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

ANUEL, 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 BESSIE R MANUEL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:01/05/21 (SEAL)

HFS 237 (R-10-2006) B

Given under my hand and seal this

, A.D., <u>Z</u>ol **B** day of

IL478-0208

Box 348