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

Doc# 1912917082 Fee \$40.00

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 05/09/2019 12:23 PM PG: 1 OF 1

Notice Of Claim Upon Real Estate

By Virtue of [] 305 ILCS 5/3-9

[X] 305 ILCS 5/5-13

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 31, in Block 2 in the Subdivision of the South 10 acres of the East 1/2 of the Southwest 1/4 of the Southeast 1/4 of Section 17, Township 38 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Commonly known as: 6241 S. Aberdeen, Chicago, Illinois 60621

P.I.N: 20-17-426-016-0000

THAT the assistance as checked above was awarded to:

CASE ID#: 91-203-000818163

CASE NAME: MAGNOLIA WHITE

COUNTY OF RESIDENCE: 200

from 11/01/2006 through 04/24/2014; inclusive, in the aggregate amount of \$17,546.03.

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 \$17,546.03, the said amount being now due and owing to the claimant.

THAT said \$17,546.03, 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 [Signature]
Authorized Representative

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

JOANNA SZUBA, 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.

[Signature]
Notary Public

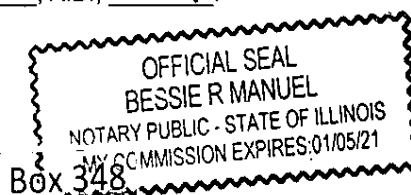
Subscribed and sworn to before me this

8th day of MAY, A.D., 2019.

My commission expires 01-05-21

HFS 289 (R-4-99)

IL478-2317



JH