## **UNOFFICIAL COF**

KAREN A. YARBROUGH COOK COUNTY CLERK

Doc# 2102641019 Fee \$38.00

DATE: 01/26/2021 09:12 AM PG: 1 OF 1

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

NOTICE AND CLAIM OF LIEN

[ ] INITIAL LIEN

[X] RENEWAL

DATE OF INITIAL LIEN [3/11/2016]

Notice is hereby given that I, Anna Maria Abbinante, 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:

Unit 9C and 3AA together with its undivided percentage interest in the common elements in Cameo Homewood Condominium as Drain eated and defined in the Declaration recorded as Document No. 20241853 as amended in the Northeast 1/4 of Section 8, Township 35 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois. Commonly known as: 940 Holbrook Road, Unit 9-C, Homwood, Illinois 60430

P.I.N. 32-08-201-018-1081, P.I.N. 32-08-201-018-1111

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A legal or equitable interest in said described	real estate	is owned by:	CASE ID #:	91-200-000FE	4622
CLIENT NAME: RAYMOND HAAS		45	<b>COUNTY OF</b>	RESIDENCE:	200
ADDRESS: Manor Care Homewood, 940 Mar	ole Ave, Ho	omewood, IL	60430		
This lien/renewal is claimed for all Aid to the Aged, Blind or Discoled (ABD) assistance paid by HFS for any applicable cash assistance paid, under Article III of the Illino's Public Aid Code, and/or any applicable amount of medical assistance paid out on your behalf under Article 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:   AUTHORIZED REPRESENTATIVE, BUREAU OF CCLLECTIONS					
State of Illinois	} } } SS	Collections/Tech	ntact/Return to:	312-793-3529	
County of Cook	}	Chicago, IL 60	607-3800		

LACIE D. MATHERS , Notary Public do hereby certify that Anna Maria Abbinante, as an Authorized Representative of the Bureau of Collections, Technical Recovery Section in the Department of Healthcare and Family Services, 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 Lacie D Matthews Notary Public State of Illinois My Commission Expires 08/30/2023 Given under my hand and seal this Lace D. Mathews

Notary Public

HFS 237 (R-10-2006)

IL478-0208