UNOFFICIAL COPY

STATE OF ILLINOIS	}	
DEPARTMENT OF HEALTHCARE AND FAMILY SERVICE	; s }	
County of Cook	}	
Notice Of Claim Upon Real Estate		Doc# 2316740064 Fee \$38.00
By Virtue of [] 305 ILCS 5/3-9		KAREN A. YARBROUGH
[X] 305 ILCS 5/5-13		COOK COUNTY CLERK
FOR: [X] MEDICAL ASSISTANCE		DATE: 06/16/2023 03:50 PM PG: 1 OF 1
[] BLIND ASSISTANCE [] AGED ASSISTANCE		
[] DISABILITY ASSISTANCE		
NOTICE IS HEKFBY GIVEN:		
That the Illinois Department of Healthcar as:	e and Family Services asserts a claim	upon the premises legally described
Lot 58 and 59 in Block 1, in 62ss' second		
Plat recorded October 29, 1597 in Book North, Range 14, East of the United Prince		
Street, Chicago, Illinois 60628		-
Renewal of Document #1325601036, file		
P.I.N. 25-10-308-020-0000, P.I.N. 25-1	0.303-021-0000	
THAT the assistance as checked above	was awa ded to:	CASE ID#: 91-236-000842083
CASE NAME: MALISSIA LIGHTNING	· C	COUNTY OF RESIDENCE: 200
from 05/01/2005 through 08/31/2012; inclusive, in the agg eg ate amount of \$109,981.52. THAT no part of said Assistance has been repaid to the Clair land, either by the recipient, their heirs, devisees,		
legatees, or by any other person(s) on be		e recipient, treii neirs, devisees,
THAT the amount claimant demands for to the claimant.	said Assistance is \$109,981 52, the s	aid amount being now due and owing
THAT said \$109,981.52, is hereby asser	ted by the ILLINOIS DEPARTMENT (F HEALTHCARE AND FAMILY
SERVICES as a claim upon the describe		9,,
		IOIS ()EPARTMENT OF LTHCART: AND FAMILY SERVICES
	Clair	
	Ву_	france Tennes
STATE OF ILLINOIS	1 Healthcare and Family Services	Authorized Representative
	Collections/Technical Recovery Prepared by/Contact/Return to: 312-793-352 401 S. Clinton - 5th Floor	19
COUNTY OF COOK) Chicago, IL 60607-3800	1
	g first duly swom upon oath, deposes	
agent and representative of the ILLINOIS the County of Cook, and claimant in the fand believes the same to be true.		
and believes the same to be tide.	\mathcal{A}_{1}	vo Wain What is the
	/\u	Notary Public
Subscribed and sworn to before me this 14-14 day of Charles I A.D., 2023		
My commission expres 3/14/26		
7 7		

HFS 289 (R-4-99)

OFFICIAL SEAL
ANNA MARIA ABBINANTE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 03/14/2026

IL478-2317