

COLLECTIONS SECTION
401 S STATE ST 4TH FLOOR
CHICAGO

IL 60605-1225

UNOFFICIAL COPY

98179430

SEP 16 1997 11:40 AM
CHICAGO, ILLINOIS



0448775 397 NL

SOUTH SHORE HOSPITAL 000

8015 SOUTH LUELLA AVENUE
CHICAGO IL 60617-1151

ACCOUNT NUMBER 448775 09/16/1997
DOCUMENT ID. 0973547174

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

PURSUANT to Section 2400 and 2401 of the Illinois Unemployment Insurance Act, as amended, notice is hereby given that there is due to the Director of Employment Security of the State of Illinois from the above named employer:

CONTRIBUTIONS and penalties, and interest on such unpaid contributions at the rate of 1% per month or 1/30 of 1% per day to 12/31/81, and at the rate of 2% per month or 12/365 of 2% per day from 01/01/82. (NOTE: Effective 01/01/88, payment received more than 30 days after the due date is deemed to have been received on the last day of the month preceding the month in which the payment was received).

2P
M

QTR/YR	CONTRIBUTIONS	UNPAID PENALTIES	OTHER	PLUS INTEREST ON CONTRIBUTIONS TO 09/30/1997
3/1996	1,187.50	0.00	0.00	223.33
	<u>1,187.50</u>	<u>0.00</u>	<u>0.00</u>	<u>223.33</u>

THAT, by virtue of the above named sections, the amount of the aforesaid contributions, interest and penalties, together with such contributions, interest and penalties which may hereafter become due, are a lien in favor of the Director of Employment Security of the State of Illinois upon all the real and personal property or rights thereto owned or thereafter acquired by the aforementioned employer.

A remittance of \$1,410.83 (interest included) received on or before 09/30/1997, or a remittance of \$1,434.25 (interest included) on or before 10/31/1997 will clear these delinquencies in your account.

UNOFFICIAL COPY

SOUTH SHORE HOSPITAL

8015 SOUTH LUELLA AVENUE
CHICAGO IL 60617-1151



0448775 397 NL

ACCOUNT NUMBER 448775

09/16/1997
DOCUMENT ID. 0973547174

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

Return the attached transmittal with your remittance. Please include the document number (0973547174) and employer account number on your remittance.

Mail all other correspondence to:

Illinois Department of Employment Security
Collections Section
401 S. State Street
Chicago, IL 60605



Director of Employment Security

By COLLECTIONS UNIT MANAGER
(312) 793-8333

RECORD NO. _____ RECORD DATE _____ COUNTY CODE 31

Property of Cook County Clerk's Office

98179430