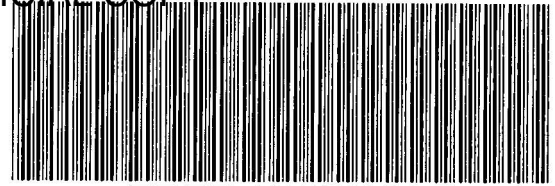


COLLECTIONS SECTION
33 S STATE ST 10TH FLOOR
CHICAGO IL 60603-2802



4168486 215 NL

FRED BUCHOLZ
DUPAGE COUNTY RECORDER
JUN.16,2015 11:28 AM
OTHER \$9.00
002 PAGES R2015-064166

MANCIONE INC
WERK MANAGEMENT
8102 LEMONT RD STE 1200
WOODRIDGE IL 60517-7773

06/03/2015
ACCOUNT NUMBER 4168486

DOCUMENT ID. 0652644703

**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).

QTR/YR	-----UNPAID-----			PLUS INTEREST ON CONTRIBUTIONS TO 06/30/2015
	CONTRIBUTIONS	PENALTIES	OTHER	
1/2014	10,382.09	130.00	0.00	2,703.31
	10,382.09	130.00	0.00	2,703.31

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 \$13,215.40 (interest included) received on or before 06/30/2015, or a remittance of \$13,420.20 (interest included) on or before 07/31/2015 will clear these delinquencies in your account.

MANCIONE INC
WERK MANAGEMENT
8102 LEMONT RD STE 1200
WOODRIDGE IL 60517-7773

UNOFFICIAL COPY



4168486 215 NL

ACCOUNT NUMBER 4168486

06/03/2015
DOCUMENT ID. 0652644703

NOTICE OF LIEN FOR CONTRIBUTIONS
UNDER THE ILLINOIS UNEMPLOYMENT INSURANCE ACT

Return the attached payment coupon with your remittance. Please include the document number (0652644703) and employer account number on your remittance.

Mail all other correspondence to:

(Illinois Department of Employment Security
Collections Section
33 S. State Street
Chicago, IL 60603)

Director of Employment Security

Collection Manager
(312) 793-9704

RECORD NO. _____ RECORD DATE _____ COUNTY CODE 43