

STATE OF INDIANA
DEPARTMENT OF MENTAL HEALTH
429 North Pennsylvania Street
Indianapolis, Indiana 46204

ORIGINAL

685100

NOTICE OF LIEN FOR PATIENT'S COST OF TREATMENT AND MAINTENANCE

Date: October 21, 1982.

TO: Laura E. Gibson, 1053 Matthews Street, Gary, IN 46406

and all others concerned.

YOU ARE HEREBY NOTIFIED:

that pursuant to Acts 1981, P.L. 178 (I.C. 1981 16-14-18.1-4) the State of Indiana, on the relation of the Mental Health Commissioner, by his duly appointed agent, intends to hold a Lien for Patient's Cost of Treatment and Maintenance on the following:

Oakland Rlty Co's Sub
All Lt 20 Blk 4 S. 19 ft Lt 19 Blk 4
N. 3 ft Lt 21 Blk 4

STATE OF INDIANA
COUNTY OF FORT WAYNE
RECORDED
WILLIAM BIELSKI JR
OCT 25 10 55 AM '82

more commonly known as 1053 Matthews Street, Gary, IN

together with all of the improvements thereon.

The Lien is for the Cost of Treatment and Maintenance of Shirley Mae Ford

in the Fort Wayne State Hospital

The relationship of the owner Laura E. Gibson to the patient

Shirley Mae Ford is Mother

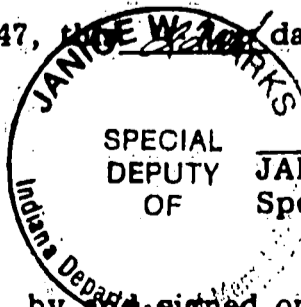
The owner Laura E. Gibson is a responsible party of the patient Shirley Mae Ford by virtue of Acts 1981, P. L. 178 (I. C. 1981 16-14-18.1-1 through 16-14-18.1-15).

The charges for the cost of treatment and maintenance of said patient became delinquent in accordance with Indiana law on May 14, 19 70.

DENNIS R. JONES, M.S.W., M.B.A.,
Commissioner, Department of Mental Health

By: Norene B. Briggs
Norene B. Briggs, Reimbursement Director
Duly Appointed Agent of the Commissioner

Subscribed and sworn to before me, a Special Deputy, duly appointed in conformity with Chapter 81, Acts of 1947, the 21st day of October, 1982.



Janice W. Marks
JANICE W. MARKS
Special Deputy

This Instrument prepared by me signed on Order of the DEPARTMENT OF MENTAL HEALTH, STATE OF INDIANA, Dennis R. Jones, COMMISSIONER OF MENTAL HEALTH.

cc: Patient and/or Responsible Relative

M/E