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RETURN TO: Hodges, Davis, Gruenberg
Compton & Sayers, P.C.
5525 Broadway
Merrillville, Indiana 46410

NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

You are hereby notified that THE METHODIST HOSPITAL OF GARY, INC., ~~Northlake Campus, 680 Grant Street, Gary, Indiana 46402,~~ or Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, (Strike Inappropriate Address) intends, pursuant to I.C. 32-8-26-3 et seq., to hold a Hospital Lien for all reasonable and necessary charges for hospital care, treatment, or maintenance of Bertice Anderson who was admitted to (Patient's Name)

the hospital on 5-13-84, was discharged on 5-15-84, and whose bill for such services is in the amount of \$ 2579.00.

To the best of the Hospital's knowledge, the patient or his legal representative claims that the following named individuals and/or entities are liable for damages for the patient's illness or injury:

Roosevelt University
c/o Barbara Gardner
430 South Michigan Ave.
Chicago, Illinois 60605

Fireman's Fund Insurance Companies
c/o Nadine Johnson
200 West Monroe St.
Chicago, Illinois 60606

File No. 640L277922

THE METHODIST HOSPITAL OF GARY, INC.

BY: Nancy IntVeldt
Nancy IntVeldt

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Nancy IntVeldt, being the Director for the above-named Campus of The Methodist Hospital of Gary, Inc., being duly sworn upon his/her oath, says that the facts stated in the foregoing are true.

Nancy IntVeldt
Nancy IntVeldt

Subscribed and sworn to before me, a Notary Public, this 29th day of May, 1984.

Lucille A. Thornton
Notary Public
A Resident of Lake County

My Commission Expires:
Sept 14, 1985

This Instrument Prepared By: Louis C. Zeheralis, Attorney at Law
5525 Broadway, Merrillville, Indiana 46410

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
JUL 5 2 21 PM '84
WILLIAM H. SNYDER
RECORDER

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