

NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

#455178

Our Lady of Mercy Hospital U.S. Highway 30 Dyer, Indiana 46311-1799 (219) 865-2141

You are hereby notified that Our Lady of	of Mercy Hospital, Route 30, Dyer, Indiana
	5-3 et seq., to hold a Hospital Lien for all
	ospital care, treatment, or maintenance of
Bonnie James who resides a	
bonnae James who restacts to	1251 W. 25/10 AVE.
	Gary, Ind. 46406
who was admitted to the hospital on	
1-18-85 , and whose bill for	c each service is in the amount of
\$ 4,932.10 ·	
To the best of the Hospital's knowledge	e, the patient or his legal representative
claims that the following named individ	duals and/or entities are liable for damages
for the patient's illness or injury.	
Physicians Mutual	Donald Watkins
· 115 So. 42nd St.	
	740 Roy St.
Omaha Neb. 68151	Dyer, Ind. 46311
•	
Farmers Insurance	Allstate Ins.
· 7460 N. Shadeland Ave.	9131 Broadview
P.O. Box 50048	P.O. Box 10249
· Indianapolis, Ind.	Merrillville, Ind. 46410
924-7977	#22193776584B
•	Attn: Brenda Johnson
Barry Sherman	naan. Brenaa Johnson
5258 Hohman Ave.	OUR LADY OF MERCY HOSPITAL
Hammond, Ind. 937-10	2
11ammona, 1na. 737-10	By XIIII A MINISTER
	by: full of full of the second
OMARIA OR TANDIANA	
STATE OF INDIANA)	
) SS:	
COUNTY OF LAKE)	
	in a second of the second of t
Laura L. Slacian , being	the Patient Account-Representative
for the above named Our Lady of Mercy I	Hospital, being duly sworn upon his her.
oath, says that the fact stated in the	foregoing are true.
-	
	Lama L. Sladan
	• //
Subscribed and sworn to before me, a No	otary Public, this day of
	or tubility this and or
1985	
	of the language to salle &.
	TONG CONTENTS
	Notary Public
My Commission Expires:	A resident of County A resident of County County
	Allinaic
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Account 12
JUSINO	,