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NOTICE OF HOSPITAL LIEN

You are hereby notified that St. Mary Medical Center, Inc. (hereinafter referred to as "Claimant"), whose principal address is 540 Tyler Street, Gary, Indiana 46402 and whose operator is John Birdzell, intends to hold a Hospital Lien for all reasonable and necessary charges for hospital care, treatment, or maintenance of the following patient: SUZETTE T BYVOETS

SUZETTE T BYVOETS 33 WOODRIDGE CIR VALPARAISO IN 46386
(Name and Address of Patient)

Said patient was admitted on the 1st day of August, 19 87 and thereafter discharged on the 2nd day of AUGUST, 19 87.

The amount claimed to be due for hospital care is \$ 14,384.65.

To the best of Claimants' knowledge, the names and addresses of those claimed by the patient or by his legal representative to be liable for damages arising from the illness or injury causing such hospital admission are as follows:

AMERICAN STATES INS CO
P O BOX 9069
HIGHLAND IN 46322

INDIANA DEPARTMENT OF INSURANCE, 504 State Office Building, Indianapolis, IN 46204

STATE OF INDIANA
LAKE COUNTY
OFFICE OF RECORDER
08 30 11 05 AM '87
MILLIAN BLASTICK
RECORDER

This Hospital Lien is being filed pursuant to the provisions of I.C. 32-8-26 in the Office of the Recorder of LAKE County.

I affirm under penalties for perjury that I am authorized to execute this instrument and that the foregoing statements and representations are true and correct.

St. Mary Medical Center, Inc.

10-28-87
(Date)

By: Robert M. Mirkov
(Signature)

ROBERT M. MIRKOV
(Printed)

Attorney for St. Mary Medical Center
(Title)

This Instrument was prepared by James E. Daugherty, Attorney at Law, 8550 Broadway, Merrillville, Indiana 46410.

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