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AMENDED NOTICE OF HOSPITAL LIEN

TO: Refer to: 797244
Medical Malpractice Division
Indiana Dept. of Insurance
Lake County Records Office
Connie S. Jones
Motherway & Glenn/Robt. Glenn, Esq.
Daugas, Morgan & Hyink
Attn: Benjamin Hyink, Esq.
McDonald's Corporation
Kemper Insurance
Cl# 050LU727706N/Diane Rogers
Docket No.: 85CL4792

Suite 300, 311 West Washington,
Indianapolis, IN 46204
2293 N. Main, Crown Pt., IN 43607
by way of attorney
100 N. Monroe, #200, Chgo., IL60603
1 N. LaSalle, #1616, Chgo., IL60602

Unknown
POBox 7127, Deerfield, IL60015

You are hereby notified that Connie Jones residing at 6910 W. 190th, in the City of Lowell, IN, who was on or about the 13th day of February 1985, injured by the alleged negligence or wrongful act of McDonald's Corporation, resident at Unknown, in the City of Unknown, for which you appear to be holding or expect to be holding funds in the future for payment for which Connie Jones has a claim, demand or cause of action against. Connie Jones is a patient of the undersigned hospital, or was a patient from 2/13/85 to 2/23/85 due to injuries.

You are further notified that the undersigned hospital is a corporation organized not for profit under the laws of the State of Indiana and is located at Main and Franciscan Rd. in the city of Crown Point, Indiana. You are further notified that the undersigned hospital claims a lien upon any claim or demand or cause of action which the said injured party may have against the alleged wrong doer, and against any funds you may have presently or in the future which may be directed towards the injured party, in accordance with the terms and provisions of the statutes of the State of Indiana in such case made and provided, and that such lien is for the reasonable value of services rendered and to be rendered in a treatment, care and maintenance of such injured person the amount of which lien will not exceed 80% of the sum paid or due to said injured person on said claim or right of action.

Doc # 797244

FILED
CROWN POINT, INDIANA
JUL 17 1988
LAKE COUNTY, INDIANA
46307

OUR FILE NO.: I1513-25
AMOUNT OF LIEN: \$5280.15

St. Anthony Medical Center
Main at Franciscan Road
Crown Point, Indiana 46307

By: Raymond E. Cluta
HAYT, HAYT & LANDAU
Attorneys for St. Anthony Med. Ctr.

AFFIDAVIT OF PERSON MAILING NOTICE

Andrea Berke, being first duly sworn on oath, deposes and says that he/she served a copy of the above notice by REGISTERED mail, by placing same in a properly stamped envelope addressed to the above mentioned, and depositing same in the United States mail on the 20th day of June 1988.

SUBSCRIBED AND SWORN TO BEFORE ME THIS 20th DAY OF June 1988.

Andrea Berke
Charles J. [Signature]
ILLINOIS NOTARY PUBLIC

This document prepared by:
The Law Firm of
HAYT, HAYT & LANDAU, 2020 Dempster Plaza, Evanston, IL 60202 (312)866-0500



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