140397

St. Anthony Medical Center, Inc.

NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

You are hereby notified that ST. ANTHON	Y MEDICAL CENTER, Main at Franciscan,
Crown Point, Indiana, 46307, intends, p	oursuant to I.C. 32-8-26-3 et seq.,
to hold a Hospital Lien for all reasons	able and necessary charges for hospital
who resides at _ 1760 Eastwood Court,	Schauburg II (0105
who was admitted to the hospital on S	Schaumburg, IL 60195
on October 5, 1990	ose bill for each service is in the amount
of \$ 18,315.10	se bill for each service is in the amount
•	
To the best of the Hospital's Rhowledge	The patient or his legal representative
claims that the following named individ	luals and/or entities are liable for
damages for the patient's Illiess or in	TOPY CIAIN
· Managemen Tleis Document	is the property of
HCM Claim the Lake Cou	
• 9950 W. Lawrence	
Schiller Park, IL 6017	6 D. Prom
 File#: 9005727D Adjust 	or: Erica Keinrad
Department of Insurance	! 12
· 311 W. Washington	
Indianapolis, IN 4620	2 22 8 26 2 4 4 4 5 6 6 4 4 6 6 6 4
This lien is being filed pursuant to I.	.c. 32-8-26-3, in the Office of the
Recorder of Lake County.	unik 100 June
	ST. ANTHONY SEDICAL CENTER
STATE OF	
	By: James Alacian
	Laura L. Slacian
STATE OF INDIANA)	Collection Supervisor
) SS:	EAU
COUNTY OF LAKE	OJANA
Laura L. Slacian , being	the Collection Supervisor
	L CENTER, being duly sworn upon his/her
oath, says that the fact stated in the	foregoing are true.
This Instrument was prevared by:	Faura Slacian
Laura L. Slacian	Laura L. Slacian
<u> </u>	
Subscribed and sworn to before me, a No	day of
December, 1990.	
<u> </u>	
•	Shake (PA Shrill)
	Shirley A. Hedrick Notary Public
My Commission Expires:	A resident of lakeCounty
6-12-93	~ ••

Revised 9-15/87