STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

95071587

95 NOV 27 AM 9:32

MARGARET CLEVELAND
RECORDER

St. Anthony Medical Center, Inc.

NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

You are hereby notified that ST. ANTHONY MEDICAL CENTER, Main at Franciscan, Crown Point, Indiana, 46307, 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 Daniel Rose who resides at 132 Commercial Ave Lowell IN 46356, who was admitted to the hospital on 4-26-95, was discharged on 6-30-95, and whose bill for each service is in the amount of $ 19,653.35.

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.

- Renne Mikolajczyk 353 Canterberry Rd Griffith In. 46319 (Insured)
- State Farm INs. 905 W Glen Pk Ave Griffith In 46319 Adj Trent Brink 14-K174 568
- Dept of INs509 State Office Building Indpl INd. 46304
- Att Jeffrey Olivaia 101 E 90th Dr. Merrillville In 46410

This lien is being filed pursuant to I.C. 32-8-26-3, in the Office of the Recorder of Lake County.

ST. ANTHONY MEDICAL CENTER

By: Laura L. Slacian
Laura L. Slacian
Collection Supervisor

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Laura L. Slacian, being the Collection Supervisor for the above named ST. ANTHONY MEDICAL CENTER, being duly sworn upon his/her oath, says that the fact stated in the foregoing are true.

This instrument was prepared by:

Laura L. Slacian

Laura L. Slacian

Laura L. Slacian

Subscribed and sworn to before me, a Notary Public, this 11 day of October, 1995.

Shirley A. Hedrick Notary Public
A resident of Lake County

My Commission Expires:

01-02-1998

Revised 9-15/87

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