

**NOTICE OF INTENTION  
TO HOLD HOSPITAL LIEN**

Notice is hereby given that **LAKESHORE HEALTH SYSTEM, INC d/b/a St. Mary Medical Center** whose principal address is 1500 South Lake Park Avenue, Hobart, Indiana, intends to hold a Hospital Lien for all reasonable and necessary charges for the hospital care, treatment or maintenance rendered to the Patient Named herein, in accordance with the provisions of I.C. 32-8-26-6, et seq.. Said Lien shall attach to any cause of action, suit or claim accruing to said Patient, or in the event of the Patient's death, to his legal representative, because of the illness or injuries that gave rise to the cause of action, suit or claim, and necessitated the hospital care, treatment or maintenance referred to herein.

1. Patient Name and Address: VINCENT ASHLEY  
3801 DEODOR STREET, EAST CHICAGO, IN 46312

2. Operator of Hospital: MR JOE MARKS, CEO

3. Date Of Admission: 1/10/96 Date of Discharge: 1/25/96

4. Amount Due For Hospital Charges: \$50,289.71

96007982

5. Names and addresses of all persons whom Patient, his Personal Representative, or his Attorney claims is responsible for payment of the damages arising from the illness or injury causing this Hospital Admission:

Name	Address
<u>ST PAUL FIRE AND MARINE INS CO</u>	<u>P O BOX 4324 ELKHART IN 46515</u>
<u>Northland Trucking</u>	<u>530 So. 108th Street, Milwaukee, Wisconsin 53214</u>

7. Name and Address of Patient's Attorney: BURTON PADOVE  
5625 HOHMAN AVENUE, HAMMOND, IN 46320  
1-219-933-7100

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

96 FEB 5 AM 8:55  
RECORDED

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

**LAKE SHORE HEALTH SYSTEM, INC., d/b/a  
St. Mary Medical Center**

By: IRENE PACHECO  
PATIENT FINANCIAL COUNSELOR  
 Title

cc: Indiana Department Of Insurance  
 311 West Washington Street, Suite 300  
 Indianapolis, Indiana 46204-2787

This Instrument Prepared By  
 The Law Offices of James E. Daugherty  
 8550 Broadway  
 Merrillville, Indiana 46410  
 (219) 769-5500

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