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Return of Manage J. Scully III FILED FOR SECONDE Road 97 OCT -9 Munster, IN 46321

## SWORN STATEMENTARIES **AND NOTICE OF INTENTION TO**

TO: Allen & Roberta Miller Ora Lee Fielder 3828 Catalpa Street East Chicago, IN 46312

PATIENT/RESIDENT:

**ORA FIELDER** 

RECORDER OF LAKE COUNTY, INDIANA Lake County Government Center 2293 North Main Street Crown Point, IN 46307

YOU ARE HEREBY NOTIFIED that FRANCISCAN HOMES & COMMUNITY SERVICES, INC. 203 Franciscan Drive, Crown Point, Indiana, 46307-4824 intends to hold a common law lien for all reasonable and necessary charges for nursing home, extended living arrangements, room, board and all other reasonable necessary and attendant charges for the above-named.

- 1. ORA FIELDER was admitted on July 12, 1995 and has continued to reside in this facility from the aforementioned date to the present time.
- 2. The amount due for nursing home care treatment and housing is \$28,398.81 as of September 30, 1997.

NAME/ADDRESS

Franciscan Homes & Community Services, Inc.

OF LIENHOLDER:

203 Franciscan Drive

Crown Point, IN 46307-4824

NAME OF PROPERTY OWNER: Allen & Roberta Miller

Ora Lee Fielder 3828 Catalpa

East Chicago, IN 46312

LEGAL DESCRIPTION:

2nd Addition Indiana Harbor; All L.21 BL.11 in Lake County

Indiana

## Key 24-30-0343-0021

The lienholder claims an interest in any real property held by the said resident or any trust in which said ORA FIELDER has an interest or which hold property for the benefit of said ORA FIELDER.

To the best of lienholder's knowledge the property mentioned is held in trust for the benefit of said ORA FIELDER.

This lien is being filed pursuant to the provision of I.C. 32-8-39-1 et seq. (Common law liens) in the Office of the Recorder of the County in which said lienholder is located. The undersigned individual executing this instrument, having been duly sworn upon oath, under the penalties of perjury hereby states that the lienholder intends to hold a lien as described above and that the facts and matters set forth in the foregoing statement are true and correct.

FRANCISCAN HOMES & COMMUNITY SERVICES, INC.

By: Model

STATE OF INDIANA)

SS:

COUNTY OF LAKE

I, Janet Nodd, being a representative for Franciscan Homes & Community Services, Inc., being duly sworn upon oath, say that the facts stated in the foregoing are true and correct.

SUBSCRIBED and SWORN To before me, a Notary Public, this 8th day of

October, 1997.

NOTARY PUBLIC

My Commission Expires: October 19, 2000

Resident of Lake County.

This instrument Prepared by: Thomas J. Scully III, Attorney at Law

506 Ridge Road, Munster, IN 46321

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