

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

Sent to Attorney Donal R. O'Dell

Date 07-28-2000 **2000 058481**

2000 AUG 15 AM 11:24

FILED IN THE LAKE CIRCUIT/SUPERIOR COURT
MORRIS W. CARTER

Cause Number: 45D02-0006-ES-93 Claim Number _____

ESTATE OF Fairman W. Beardsley, Deceased

Claimant Name: ST. Anthony Medical Center

Claimant Address 1201 S. Main St. Crown Point. IN. 46356

DESCRIPTION OF CLAIM Medical Bills

05-31-1997	52.51
07-07-1997	46.90
11-19-1997	70.37
11-28-1997	230.50
07-16-1998	43.68
08-05-1998	36.65
05-12-1999	63.54

TOTAL AMOUNT OF CLAIM 544.25

STATE OF INDIANA, COUNTY OF LAKE SS:

BEFORE ME, a Notary Public/Clerk of the Circuit/Superior Court, of Lake County, Indiana, personally appeared _____, who being sworn, states the above Claim against the estate of Fairman Beardsley, Deceased, is correct; that all credits and deductions have been given, that there are are no further set-offs against the Claim; that the balance shown in the Claim is now justly due and owing to Five hundred forty-four & 25 cents, all to the best of his/her knowledge and belief.

Melba Vana
CLAIMANT

Subscribed and sworn to before me, on Aug. 3 2000

Commission Expires:

01-02-2008

Shirley A. Hedrick
Clerk/Notary, A resident of LAKE

By: Shirley A. Hedrick
Deputy Clerk

10.00
E.P.
028392