

OFFICE OF THE RECORDER
LAKE COUNTY
AT CROWN POINT, INDIANA 2009 061825

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2009 SEP -9 AM 10:11
MICHAEL A. BROWN
RECORDER

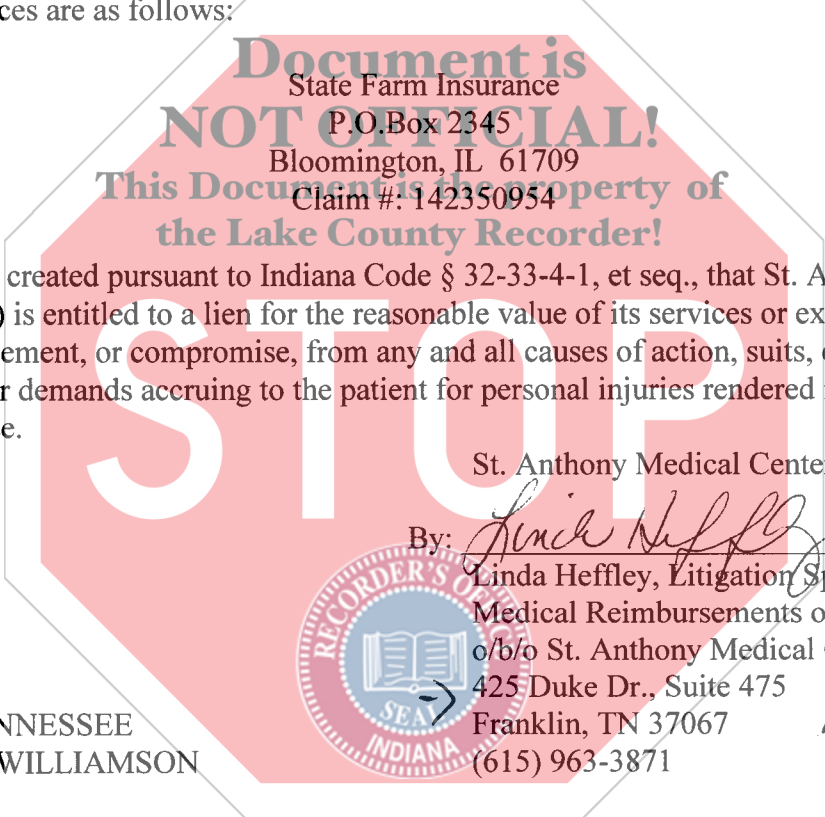
NOTICE OF HOSPITAL LIEN

Notice is hereby given by St. Anthony Medical Center (SSFHS) located at 1201 South Main St., Crown Point, IN 46307 operated by Sisters of St. Francis Health Services, Inc located at 1515 W. Dragoon Trail, Mishawaka, IN 46544, that St. Anthony Medical Center (SSFHS) has furnished reasonable and necessary hospital care, treatment and/or maintenance to:

Patrick L. Wease
229 6Th St Ne
Demotte, IN 46310

from 6/30/2009 to 6/30/2009 and that the amount due for the services is \$ 1,019.67.

The person(s), firm(s), or corporations(s) claimed by the patient or his/her representative to be liable for damages arising from the illness or injuries for which the patient received healthcare services are as follows:



State Farm Insurance
P.O.Box 2345
Bloomington, IL 61709
Claim #: 142350954

A lien is hereby created pursuant to Indiana Code § 32-33-4-1, et seq., that St. Anthony Medical Center (SSFHS) is entitled to a lien for the reasonable value of its services or expenses on any judgement, settlement, or compromise, from any and all causes of action, suits, claims, counterclaims or demands accruing to the patient for personal injuries rendered in favor of Patrick L. Wease.

St. Anthony Medical Center (SSFHS)

By: *Linda Heffley*
Linda Heffley, Litigation Specialist

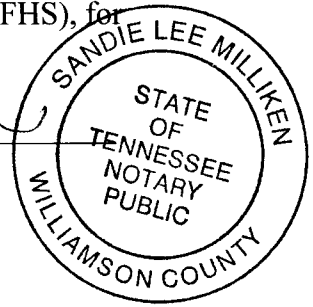
Medical Reimbursements of America, LLC
o/b/o St. Anthony Medical Center (SSFHS)
425 Duke Dr., Suite 475
Franklin, TN 37067
(615) 963-3871

STATE OF TENNESSEE
COUNTY OF WILLIAMSON

✓ # 23279
12-13

The foregoing statement was acknowledged and verified before me, on September 2, 2009 by Linda Heffley, the duly authorized agent of St. Anthony Medical Center (SSFHS), for and on behalf of said hospital.

Sandie Lee Milliken
Sandie Lee Milliken, Notary Public



My Commission Expires: 10/1/2012

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