OFFICE OF THE RECORDER

LAKE COUNTY
AT CROWN POINT, INDIANO 080626

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 DEC -4 AM 9: 32

MICHAEL A. BROWN RECORDER

NOTICE OF HOSPITAL LIEN

Notice is hereby given by St. Margaret Mercy North (SSFHS) located at 5454 Hohman Ave., Hammond, IN 46320 operated by Sisters of St. Francis Health Services, Inc located at 1515 W. Dragoon Trail, Mishawaka, IN 46544, that St. Margaret Mercy North(SSFHS) has furnished reasonable and necessary hospital care, treatment and/or maintenance to:

Lartece Harris 3044 Bernice Road Lansing, IL 60438

from 10/29/2009 to 10/29/2009 and that the amount due for the services is \$1,229.54.

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 2350
Bloomington, IL 61702-2370
Claim #: 13A698868
This Document is the property of

A lien is hereby created pursuant to Indiana Code § 32-33-4-1, et seq., that St. Margaret Mercy North(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 Lartece Harris.

St. Margaret Mercy North(SSFHS)

Ry

Linda Heffley, Litigation Specialist

Medical Reimbursements of America, LLC

o/b/o St. Margaret Mercy North(SSFHS)

425 Duke Dr., Suite 475

Franklin, TN 37067

(615) 963-3871

STATE OF TENNESSEE COUNTY OF WILLIAMSON

The foregoing statement was acknowledged and verified before me, on November 20, 2009 by Linda Heffley, the duly authorized agent of St. Margaret Mercy North(SSFHS), for and, on behalf of said hospital.

My Commission Expires: 19 201 Cassie Dawn Entrekin, Notary Public

12W \$ 247