

OFFICE OF THE RECORDER  
LAKE COUNTY  
AT CROWN POINT, INDIAN **2010 057804**

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2010 OCT -6 AM 9:33

MICHAEL R. CAJMAN  
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:

Brenda E. Noyes  
233 N NICHOLS ST  
LOWELL, IN 46356-1745

from 4/28/2010 to 4/28/2010 and that the amount due for the services is \$ 510.00.

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:

Indiana Insurance  
P.O. Box 515097  
Los Angeles, CA 90051  
Claim #: 004014610

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 Brenda E. Noyes.

St. Anthony Medical Center (SSFHS)

By: Cassie King  
Cassie King, 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

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The foregoing statement was acknowledged and verified before me, on September 24, 2010 by Cassie King, the duly authorized agent of St. Anthony Medical Center (SSFHS), for and on behalf of said hospital.

Linda Heffley  
Linda Heffley, Notary Public

My Commission Expires: 11/01/2015

