

LAKE COUNTY
FILED FOR RECORD

2011 056247

2011 OCT 12 AM 9:11

RECORDED

Return to: Law Offices of Neil J. Greene, LLC
250 Parkway Drive, Suite 160, Lincolnshire, IL 60069

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO:
Patient:
Ms. Karen A O'Connor
540 Avalon Drive
Dyer, IN 46311

Attorney:
Mr. Walter Alvarez
1524 W. 96th Avenue
Crown Point, IN 46307

Lake County Recorder
2293 N. Main Street
Crown Point, IN 46307

Indiana Department of Insurance
311 W Washington Street, Suite 300
Indianapolis, IN 46204



You are hereby notified that St. Margaret - Dyer, 24 Joliet Street, Dyer, IN 46311799, intends to hold a Hospital Lien for all reasonable and necessary charges for hospital care, treatment, or maintenance of the above-listed patient as follows:

Karen A O'Connor was a patient in the hospital from 8/23/2011 -8/31/2011 due to an injury that occurred on 08/23/11. The amount due for hospital care, treatment, or maintenance during the above hospitalization is \$1,357.00.

To the best of the Hospital's knowledge, the patient or the patient's legal representative claims that the following named individuals and/or entities are liable for damages arising from the patient's illness or injury causing the hospital stay: Ms. Donna Bednarek, SuperValu Risk Management 150 Pierce Road, Suite 200, Itasca, IL 60143, Insured: Jewel Food Store.

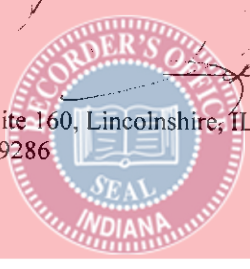
This lien is being filed pursuant to the Hospital Lien Law, I.C. §32-33-4 in the Office of the Recorder of the County in which the Hospital is located, within one hundred and eighty (180) days after the patient was discharged from the hospital. The undersigned individual executing this instrument, having been duly sworn upon oath, under the penalties of perjury hereby states that the hospital intends to hold the Hospital Lien as described above and that the facts and matters set forth in the foregoing state are true and correct, and that reasonable care has been taken to redact each Social Security number in this document, unless required by law.

STATE OF ILLINOIS
COUNTY OF LAKE

St. Margaret - Dyer
BY: [Signature]
Kendra Ro, Reimbursement Representative

Subscribed and sworn to before me, a Notary Public, on September 26, 2011 by Kendra Ro, for and on behalf of said hospital.

Law Offices of Neil J. Greene, LLC, 250 Parkway Dr., Suite 160, Lincolnshire, IL 60069
Telephone 847-403-5800 | Facsimile 847-403-5801 | 11-19286



AMOUNT \$ 11.00
CASH _____ CHARGE _____
CHECK # 150022
OVERAGE _____
COPY _____
NON - COM _____
CLERK CA

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