

784594

SWORN STATEMENT AND  
NOTICE OF INTENTION TO  
HOLD HOSPITAL LIEN

December 7, 1984

TO: Rufus Allen - minor, c/o Rufus Allen, Sr.

ADDRESS: Eldg. 2-62 Schroeder - Yonkers, New York 10701

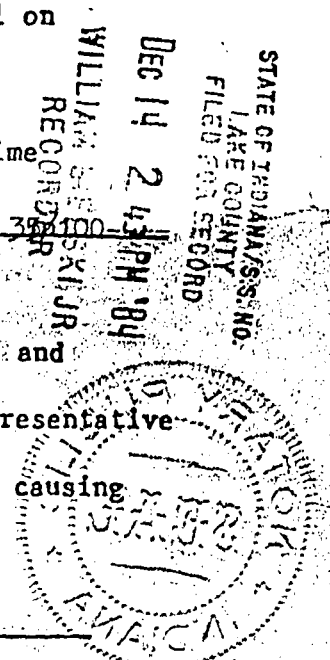
You are hereby notified that Munster Medical Research Foundation, d/b/a  
The Community Hospital (hereinafter called "Claimant") whose address is  
901 MacArthur Blvd. Munster, IN 46321

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:

1. The patient was admitted to the hospital on  
September 14, 1984 and discharged from the hospital on  
September 16, 1984.
2. The amount due for hospital care during the above time  
period is One thousand four hundred seventy four dollars and 35/100  
Dollars (\$1,474.35).
3. To the best of Claimant's knowledge the following names and  
addresses are those claimed by the patient or his legal representative  
to be liable for damages arising from the illness or injury causing  
the hospital stay:

- (a) Insurance Company of North America  
Attn: Linda Richards  
P.O. Box 50866 Indianapolis, IN 46250
- (b) \_\_\_\_\_
- (c) \_\_\_\_\_

This lien is being filed pursuant to the Hospital Lien Law, I.C.  
32-8-26 in the Office of the Recorder of the County in which the Claimant  
is located, within ninety (90) days after the patient was discharged  
from the hospital. The undersigned individual executing this instrument,  
having been duly sworn upon his/her oath, under the penalties of perjury  
hereby states that Claimant intends to hold a Hospital Lien as described



20/11

