STATE OF INDIANA
LAKE COUNTY
[illegible]

310938931

98030516

Return To: Hodges & Davis, P.C.
8700 Broadway, Merrillville, IN 46410

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO: Joseph M. Gilarski

Patient: Joseph M. Gilarski
2940 W Old Ridge Rd
Hobart, IN 46342

Attorney: _____

Recorder of Lake County, Indiana
Lake County Government Center
2293 North Main Street
Crown Point, Indiana 46307

Indiana Department of Ins.
311 W. Washington St,St 300
Suite 300
Indianapolis, Indiana 46204

You are hereby notified that THE METHODIST HOSPITALS, INC., 600 Grant Street, Gary, IN 46402, 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 March 5, 1998, and was discharged from the hospital on March 12, 1998.

2. The amount due for hospital care, treatment or maintenance during the above hospitalization is Twenty thousand six hundred and six dollars & twenty six cents ($20,606.26) Dollars.

3. 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:

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 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 statement are true and correct.

THE METHODIST HOSPITALS, INC.

(1) BY: Esther C Broadnax
Esther C. Broadnax

STATE OF INDIANA)
) ss:
COUNTY OF LAKE)

I, Esther C. Broadnax, being a Financial Counselor for The Methodist Hospitals, Inc., being duly sworn upon oath, says that the facts stated in the foregoing are true and correct.

(2) Esther C Broadnax
Esther C. Broadnax

Subscribed and sworn to before me, a Notary Public, this 25th day of March, 1998.

Virgil R. Bell
Notary Public
A Resident of Lake County

My Commission Expires:
8-6-99

This Instrument Prepared By: Clyde D. Compton, Attorney at Law
8700 Broadway, Merrillville, IN 46410

3593

900 Kin
CK# 5994

Document is NOT OFFICIAL! This Document is the property of the Lake County Recorder! STOP