STA:

2000 055987

2090 AUG -7 FH 1: .

Return To:

MORRIS V/ Hodges & Davis, P.C.

8700 Broadway, Merrillville, IN 46410

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO:

Paul T. Sellars Sr.

Patient:

Paul T. Sellars Sr.

III5 W. Union St.

South Bend, IN 46613

Attorney: Young & Hubbell

4231 Broadway

Gary, IN

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 May 16, 2000 and was discharged from the hospital on May 17, 2000

2. The amount due for hospital care, treatment or maintenance during the above hospitalization is One Thousand Five Hundred Two and 00/100 (\$ 1502.00) 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: Margaret Cooper

Margaret Cooper

STATE OF INDIANA

COUNTY OF LAKE

Margaret Cooper , being a Account Representative for The Methodist Hospitals, Inc., being duly sworn upon oath, says that the facts stated in the foregoing are true and correct.

(2) /This Copper Margaret Cooper
Subscribed and sworn to before me, a Notary Public, this ____ day of

(Line , 2000.

85:

Many fueres

Notary Public

A Resident of Lake County

3/24/08

This Instrument Prepared By:

Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410

3593

41P S000

My Commission Expires:

8527 900 TIS

25× | [