2003 104641



Return To: Hodges & Davis, P.C. 8700 Broadway, Merrillville, IN 46410 SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO: Patient:	Kevin M. Warr Kevin M. Warr	Attorney:	
	5230 E. 10 th Ave. Gary, IN 46403		
Recorder of Lake County, Indiana Lake County Government Center 2293 North Main Street Crown Point, Indiana 46307		Indiana Departm 311 W. Washingt Suite 300 Indianapolis, I	
Gary, IN 4	6402, intends to hold	Hospital Lien for all	INC., 600 Grant Street, reasonable and necessary above listed patient as
2. above hosp:	scharged from the hospi The amount due for hos italization is <u>One Th</u>	d to the hospital on Apr al on April 29, tal care, treatment or m usand Eight Hundred Fifte	2003 . Maintenance during the
	To the best of the Hos esentative claims that for damages arising f		ient or the patient's ividuals and/or entities or injury causing the
33-4 in the within one Hospital. sworn upon intends to	e Office of the Recorde hundred and eighty (18 The undersigned indiv- oath, under the penal hold the Hospital L	of the County in which days after the patient ual executing this institutes of perjury, hereby s	the Hospital is located, was discharged from the rument, having been duly states that the Hospital and that the facts and correct.
		THE METHODIST HOSPITA	LS JINC.
STATE OF IN	NDIANA)) ss:) BY: CHEVELLE SMITH	tell
Hospitals,	Inc., being duly swor	upon oath, says that t	ative for The Methodist the facts stated in the
Aptent My Commissi Na∆ch∈	ribed and sworn to before M , 2003. Ion Expires: 94.001	CHEVELLE SMITH The me, a Notary Explic, the A Resident of A	Notary Public County
This Instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410			

Official Seal

JESSICA TORRES
Resident of Lake County, IN
My commission expires
March 24, 2011