Acct 355018292

TO:

Patient:

2004 034711

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

ro: Patient:	Omar Samayoa Omar Samayoa 3848 N Sawyer	Attorney:		
	Chicago, IL 60618	 		
Lake Count 2293 North	of Lake County, India by Government Center Main Street ot, Indiana 46307	311 Suit	iana Department of Insu: W. Washington Street te 300 ianapolis, Indiana 4620	
Street, Ga necessary	ary, IN 46402, inter charges for hospital	nds to hold a Hos	ODIST HOSPITALS, INC., spital Lien for all rea or maintenance of the	asonable and
and was diabove hosp $ \begin{array}{c} 2.\\ \text{above hosp}\\ (\$ $	Scharged from the hore the amount due for sitalization is One ()62.00	ospital on March hospital care, tr Thousand Sixty-Tw ars. Hospital's knowle	eatment or maintenance conder dge, the patient or the	during the patient's
legal repr are liable nospital s	e for damages arisin	nat the following g from the patie	named individuals and ent's illness or injury	or entities causing the
33-4 in tocated, discharged instrument hereby sta	the Office of the within one hundred from the Hospital, having been duly ates that the Hospital	Recorder of the d and eighty (1 al. The unders sworn upon oath tal intends to he d matters set for	Hospital Lien Law, I.C. County in which the 80) days after the signed individual exe, under the penalties ld the Hospital Lien the in the foregoing state of the Hospitals, INC.	Hospital is patient was cuting this of perjury, as described
		(1) BY:	angue Durkich	
STATE OF I) ss:		Angile Djuklich	
COUNTY OF		haina Babian	t Denuesantativa for W	oo Mothodiat
Hospitals,	Inc., being duly start true and correct	sworn upon oath,	t Representative for The says that the facts st	ated in the
		(2)	angle Gukich Angle Djukich ry Public, this 12th	
Subs	cribed and sworn to		ry Public, this 1241	day of
My Commiss	sion Expires:	A Residen		ary Public County (a)
7779707 This Instr	5 34 20/1 cument Prepared By: 0	Clyde D. Compton,	Attorney at Law	County CK 11496
		5.55 Bloadway, Hel	Official Seal LISA STONE Resident of Lake County, I My commission expires	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

