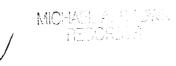
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TO:

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Return To:

Donnell Hampton

Hodges & Davis, P.C.

## 8700 Broadway, Merrillville, IN 46410 SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

Patient:	Latroy Hampton 2075 Carolina Stree	Attorney:		-
-	Gary, IN 46407	<u>-</u>		
Lake Count 2293 North	f Lake County, Indian y Government Center Main Street t, Indiana 46307	311 W Suite	ana Department of Ins V. Washington Street e 300 anapolis, Indiana 462	
ocicity da	charges for hospital follows:	care, treatment o		easonable and above listed
2. above hosp:	The amount due for hitalization is Five	spital on <u>Februar</u> Mospital care, trea Hundred Twenty Sey	ry 02 , 2005 . atment or maintenance ven and 00/100	
3. legal repre	To the best of the Hesentative claims the for damages arising	lospital's knowledg	ge, the patient or the amed individuals and t's illness or injury	a /
located, w discharged instrument, hereby stat	ithin one hundred from the Hospital having been duly tes that the Hospita that the facts and	ecorder of the C and eighty (180 The undersignment sworn upon oath, al intends to hold	spital Lien Law, I.C. ounty in which the ounty in which the law, I.C. ounty in which the grad after the gned individual executed the Hospital Lien in the foregoing s	Hospital is patient was ecuting this of perjury,
		THE METHODI	ST HOSPITALS, INC.	
STATE OF IN	) ss:	(1) BY: <u> </u>	algaret Cooper Maggaret Cooper	ev_
nobpicais,	aret Cooper , Inc., being duly sw re true and correct.	being a <u>Patient</u> orn upon oath, sa	Representative for T ys that the facts st	he Methodist cated in the
		(2) Margar	ret Cooper	<del></del>
Subscr	ribed and sworn to be, 2005.	fore me, a Notary	Public, this 10	day of
My Commission	on Expires:	A Resident	of Sex. C	ary Public
This Instrur	<u>さぶけ</u> <b>08</b> ment Prepared By: Cly 870	yde D. Compton, Att 30 Broadway, Merri	torney at Law	136