SWEE OF INDIANA LAKE COUNTY FILED FOR RECORD

2005 044678

2005 JUN - 1 FH 1: 14

355379009

MICHAEL A. TROVAN RECORDER

Return To:

Hodges & Davis, P.C.

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

		TOTAL TITEM
TO: Patient:	Aiesha T. Anthony Aiesha T. Anthony  962 Dunham  Grand Rapids, MI 49506	ey:
Lake Count 2293 North	n Main Street St	ndiana Department of Insurance 11 W. Washington Street uite 300 ndianapolis, Indiana 46204
pereer, Ga	charges for hospital care, treatments follows:	
above hosp: (\$ 1,20	resentative claims that the following for damages arising from the pat:	reatment or maintenance during the
This Lien is being filed pursuant to the Hospital Lien Law, I.C. Section 32-33-4 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 METH	MODIST HOSPITALS, INC.
STATE OF IN	) ss:	Pargaret Cooper
nospitais,	aret Cooper , being a <u>Patier</u> Inc., being duly sworn upon oath, are true and correct.	nt Representative for The Methodist says that the facts stated in the
war	ribed and sworn to before me, a Nota	
		Notary Public nt of Sch. County
ınıs instru	ment Prepared By: Clyde D. Compton, 8700 Broadway, Me	Attorney at Law rrillville, IN 46410

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