## 2005 045204

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2005 JUH-2 PH 1:16

MICHAEL ALBOOMS RECORDER

Acct 654220565



Return To:

Hodges & Davis, P.C.

8700 Broadway, Merrillville, IN 46410

## SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO:

Patient:

Kenneth A. Stringfellow
Kenneth A. Stringfellow
Attorney: Robert Lewis 4740 Pennsylvania St.

Gary, IN 46409

2148 W 11th Ave

Gary, IN 46404

Recorder of Lake County, Indiana Lake County Government Center 2293 North Main Street Crown Point, Indiana 46307

Indiana Department of Insurance 311 W. Washington Street 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:

- The patient was admitted to the hospital on April 14 , 2005 and was discharged from the hospital Conun April 124 der 2005
- 2. The amount due for hospital care, treatment or maintenance during the above hospitalization is One Thousand Three Hundred Seventy-Nine

  (\$\frac{1,379.00}{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. 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 METHODIST HOSPITALS, INC.

	(1) BY: Angre Durkich
STATE OF INDIANA ) ) ss:	(1) BY: <u>Unque Duk wh</u> Ingie Djukich
COUNTY OF LAKE )	
Angie Djukich Hospitals, Inc., being duly foregoing are true and correc	, being a <u>Patient Representative</u> for The Methodist sworn upon oath, says that the facts stated in the t.
	(2) <u>Angle Durkich</u>
Subscribed and sworn to 2005.	before me, a Notary Public, this day of
My Commission Expires:	Dang De Diaco Notary Public
3-34-08	A Resident of Oscile County
	Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillyille, IN 46410