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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

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

Hodges & Davis, MC+GAEL A BROWN 8700 Broadway, MerRECIVILLE, IN 46410 SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

Patient: Cynthia Allen-Lockett Attorney: 2301 Clark Rd. Bldg 25	
Gary, IN 46404	
Recorder of Lake County, Indiana Indiana Department of Insurance Lake County Government Center 311 W. Washington Street 2293 North Main Street Suite 300 Crown Point, Indiana 46307 Indianapolis, Indiana 46204	
You are hereby notified that THE METHODIST HOSPITALS, INC., 600 Gran Street, Gary, IN 46402, intends to hold a Hospital Lien for all reasonable an necessary charges for hospital care, treatment or maintenance of the above listed patient as follows:	nd
1. The patient was admitted to the hospital on April 23 rd , 2005 and was discharged from the hospital on April 23 rd , 2005 2. The amount due for hospital care, treatment or maintenance during the above hospitalization is One thousand three hundred fifty nine 00/100 (\$ 1359.00	_
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:	es
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.	.s .s .s
THE METHODIST HOSPITALS, INC.	
STATE OF INDIANA)) ss: COUNTY OF LAKE)	
Alycia Smith , being a <u>Patient Representative</u> for The Methodist Hospitals Inc., being duly sworn upon oath, says that the facts stated in the foregoing artrue and correct.	, e
(2) Sylva Smith Alycia Smith	
Subscribed and sworn to before me, a Notary Public, this day of day of	
My Commission Expires: A Resident of County County	
This Instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410 Official Seal JESSICA TORRES) /
Official Seal JESSICA TORRES JESSICA TORRES	P