

2005 052645

2005 JUN 27 AM 10: 58

Official Seal

(SEAL)

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

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

TO:	VIRNI L. WEBB			
Patient:	VIRNI L. WEBB	Attorney	:	
_	6501 EAST 4 <sup>TH</sup> AVEN	IUE		
_	GARY, IN 46403			
	Lake County, Indi		liana Department o	
	Government Center		W. Washington St	reet
2293 North			te 300	
Crown Point	, Indiana 46307	Inc	lianapolis, Indian	a 46204
Street, Gar necessary c patient as	ry, IN 46402, into harges for hospita	ends to hold a Ho al care, treatment	spital Lien for a or maintenance o	INC., 600 Grant all reasonable and f the above listed
and was dis	charged from the ranged from the ranged from the range of	ospital on APRIL hospital care, to	2005 . reatment or mainte	nance during the
(\$ <u>9,767.00</u>				
legal repre	for damages arisi	that the following	named individua	or the patient's ls and/or entities injury causing the
33-4 in the located, we discharged instrument, hereby state	ne Office of the ithin one hundre from the Hospith having been duly tes that the Hospithat the facts and the rect.	Recorder of the ed and eighty (Stal. The under y sworn upon oath ital intends to h d matters set for THE METH	County in which 180) days after signed individuant, under the pena	the Hospital is the patient was lexecuting this lties of perjury, Lien as described ing statement are
Hospitals,		sworn upon oath,		for The Methodist
My Commissi  Warch &	ribed and sworn to , 2005. on Expires: <u>PY_2011</u>	before me, a Nota A Reside Clyde D. Compton,	ica Lorre	Notary Public County