## STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

## 2005 052657

2005 JUH 27 AN 10: 58

612083592

MICHAEL A. BROWN RECORDER

Hodges & Davis, P.C. Return To: , 8700 Broadway, Merrillville, IN 46410 SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN Clifford M. Farmer Clifford M. Farmer Attorney: 1814 E. 20th Place Gary, IN 46407 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 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: 1. The patient was admitted to the hospital on May 19, 2005 and was discharged from the hospital on May 21 2005.

2. The amount due for hospital care, treatment or maintenance during the above hospitalization is Six Thousand Two Hundred Eighty One and 00/100 (\$ 6,281.00 ) Dollars. 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 true and correct. THE METHODIST HOSPITALS, INC. (1) BY: Margaret Croper

Margaret Cooper STATE OF INDIANA COUNTY OF LAKE Margaret Cooper \_, being a <u>Patient Representative</u> for The Methodist Hospitals, Inc., being duly sworn upon oath, says that the facts stated in the foregoing are true and correct. (2) Margaret Cooper

Margaret Cooper Subscribed and sworn to before me, a Notary Public, this 3 day of Tosas, 2005. Dany Drust My Commission Expires: A Resident of Lake March 24, 2008 This Instrument Prepared By: Clyde D. Compton, Attorney at Law

8700 Broadway, Merrillville, IN 46410