

## 2005 115578

TO:

LIEN

MARCIA POZDOL

2005 DEC 30 PM 11: 52

## SWORN STATEMENT & NOTICE OF INTENTIONATO HOLD HOSPITAL LIEN RECORDER

	MARCIA POZDOL PT #09578411	
	2854 LAKE STREET	
	LAKE STATION, IN 46405	
	Recorder of Lake County, Indiana Lake County Government Center 2293 North Main Street Crown Point, Indiana 46307	Indiana Department of Insurance 311 West Washington Street Suite 300 Indianapolis, IN 46204
You are hereby notified that St. Mary Medical Genter whose address is 1500 S. Lake Park Ave., Hobart, Indiana 46342, 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 men 10/13/05 e property of and discharged from the hospital on Lake C10/20/05 Recorder!		
2.	The amount due for hospital care during the above time period SEVEN THOUSAND TWO HUNDRED SEVENTY TWO A	
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 entitles are liable for damages arising from the patient's illness or injury causing the hospital stay:  AIG INSURANCE P.O. BOX 15510 WILMINGTON, DE 19850 CL #0500263555  This lien is being filed pursuant to the Hospital Lien Law, I.C. 32-8-26 in the Office of the Recorder of the County in which the hospital is located, within one hundred eighty (180) days after the patient was discharged from the hospital. The undersigned individual executing this instrument, having been duly sworn upon his/her oath, under the penalties of perjury hereby states that Claimant intends to hold a Hospital Lien as described above and that the facts and matters set forth in the foregoing statement are true and correct.  STATE OF INDIANA) COUNTY OF LAKE ) SS:		
CHRISTA HACKER, being the collection clerk for the above named, St. Mary Medical Center, being duly sworn upon his/her oath, says that the facts stated in the foregoing are true and correct.  CHRISTA HACKER, PFS Support		
Subscrib	ed and sworn to before me a Notary Public this	Day of 20
	mission Expires: <u>02/14/09</u> in Lake County, Indiana	LISA WARD, Notary Public
This instrument was prepared by CHRISTA HACKER		

#00527V