STATE OF INDIAMA LAKE COUNTY FILED FOR RECORD

2006 026579

2006 #17 3! FM 1:00

Return To:

Hodges & Davis, P.C. 8700 Broadway, Merrillville, IN 46410

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

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

TO: Patient:	CHUNG YANG CHUNG YANG 2599 W 85 <sup>TH</sup> AVE MERRILLVILLE, IN 46410	Attorney:	
Lake Coun 2293 Nort	of Lake County, Indiana ty Government Center h Main Street nt, Indiana 46307	311 W Suite	na Department of Insurance . Washington Street 300 napolis, Indiana 46204
Street, G	ary, IN 46402, intends charges for hospital co s follows:	to hold a Hospi are, treatment or	IST HOSPITALS, INC., 600 Grant tal Lien for all reasonable and maintenance of the above listed
2. above hos	The patient was admitted ischarged from the hospithe amount due for hospitalization is SIX HUN 05.40 ) DOLLARS.	tal on <u>JANUARY</u> pital care, trea	tment or maintenance during the
3. legal rep	To the best of the Hos resentative claims that e for damages arising f	the following na	e, the patient or the patient's amed individuals and/or entities 's illness or injury causing the
located, discharged instrument hereby st	within one hundred and from the Hospital.  t, having been duly swates that the Hospital that the Hospital	order of the Co and eighty (180 The undersig orn upon oath, intends to hold	spital Lien Law, I.C. Section 32- county in which the Hospital is days after the patient was under the penalties of perjury, the Hospital Lien as described in the foregoing statement are
THE METHODIST HOSPITALS, INC.			
STATE OF COUNTY OF	INDIANA ) ) ss:	(1) BY: MELISSA	A M. VASQUEZ
mospitais,	SSA VASQUEZ , be Inc., being duly swor are true and correct.	eing a <u>Patient R</u> n upon oath, say	Representative for The Methodist ys that the facts stated in the
My Commiss	cribed and sworn to before 2006.	Resident of	Public, this day of  Notary Public  of Sake County