STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2007 080364

2007 OCT -9 AM 9: 59

MICHAEL A. BROWN RECORDER

100138151

Return To:

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

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO:	Hugh Struss		
Patient:	Hugh Struss	Attorney:	·
_	P.O. Box 575		
-	Whiting, IN 46394		
Lake County 2293 North M	Lake County, Indiana Government Center Main Street , Indiana 46307	Indiana Department of Inst 311 W. Washington Street Suite 300 Indianapolis, Indiana 4620	
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. and was disc	charged from the hospital on	sthe hospital on September 01, 200 September 08, 2007	
above hospit	talization is <u>Twenty One Th</u> ,882.00 / Dollars.	nousand Eight Hundred Eighty-Two	
<pre>liable for stay:</pre>	sentative claims that the damages arising from the	following named individuals and patient's illness or injury caus	/or entities are ing the hospital
This 1	Lien is being filed pursuant	to the Hospital Lien Law, I.C. Se	ection 32-33-4 in
hundred and undersigned	eighty (180) days after t individual executing this	unty in which the Hospital is loc he patient was discharged from th instrument, having been duly sworn	e Hospital. The 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			
	re true and correct.		
	(1)	BY: Methodist hospitals, inc. By: Mail Deurich	
STATE OF INI	DIANA) ss:	Angie Djukich	
I And	gie Djukich , bei	ng a Patient Representative for	r The Methodist
Hospitals, are true and	Inc., being duly sworn upon	oath, says that the facts stated	
		Angie Djukich	
September	ribed and sworn to before me 1, 2007.	e, a Notary Public, this 25" da	y of
My Commission	on Expires:	Notary	Public
march a	94,2011	A Resident of Lake	County
		jury, that I have taken reasonabl cument, unless required by law.	
This Instru	ment Prepared By:		CR14292
	8700 Br	D. Compton, Attorney at Law roadway, Merrillville, IN 46410	CAR
		Official Seal	No. on a continue of
		SEAL SEAL LISA STONE Resident of Lake of My commission ex March 24, 2011	County, IN prices