STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2007 097337

2007 DEC 12 PM 1: 27

200237086

TO:

MICHAEL A. BROWN RECORDER

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

TO:	Marc Lewis		
Patient:	Marc Lewis	Attorney:	
•	4202 S Ohio St		
	Michigan City, IN 4636	0	
Lake County 2293 North !	Lake County, Indiana Government Center Main Street , Indiana 46307	Indiana Department of Insurance 311 W. Washington Street Suite 300 Indianapolis, Indiana 46204	
IN 46402, i	ntends to hold a Hospita	HE METHODIST HOSPITALS, INC., 600 Grant Street, Gary, al Lien for all reasonable and necessary charges for nce of the above listed patient as follows:	
1.	The patient was admitted	to the hospital on November 20, 2007	
and was disc	charged from the hospital	on November 20, 2007 .	
2.		tal care, treatment or maintenance during the	
		nd Seven Hundred Fifty-Three	
(\$ 1,		tal's knowledge, the patient or the patient's	
legal repre	sentative claims that th	ne following named individuals and/or entities are patient's illness or injury causing the hospital	
-			
the Office	of the Recorder of the	ant to the Hospital Lien Law, I.C. Section 32-33-4 in County in which the Hospital is located, within one	
		the patient was discharged from the Hospital. The	
		s instrument, having been duly sworn upon oath, under	
		ates that the Hospital intends to hold the Hospital the facts and matters set forth in the foregoing	
	re true and correct.	and rades and matters but retain in the recognition	,
		THE METHODIST HOSPITALS, INC.	
		(1) BY: angil Dittalich	
STATE OF IN		(1) BY: Ungel Die Cho Angie Djukich	
COUNTY OF LA	AKE) ss:		
I And	gie Djukich , be	eing a Patient Representative for The Methodist	:
Hospitals,	Inc., being duly sworn up	on oath, says that the facts stated in the foregoing	J
are true and		(2) Cmaio, Diupirh,	
		Angre Djukich,	
Subscr Olcon bly	ribed and sworn to before , 2007.	me, a Notary Public, this day of	
SACKILLERY !		Kusa Stone	
My Commissio	on Expires:	Notary Public A Resident of Sanc County	
march &	14, 2011) A South of the second of the	
	nder the penalties for p security number in this d	erfur, that I have taken reasonable care to redact inclument, unless required by law.	:
This Instrum	ment Prepared By: 1yde 8700	Ck 14435 EV. Compton, Attorney at Law Broadway, Merrillville, IN 46410	'r
		Official Seal LISA STONE Resident of Lake County, IN My commission expires March 24, 2011	