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2009 APR 30 PM 1:02

MICHAEL A. BROWN  
RECORDER



Return to: St. Margaret Mercy Healthcare Centers  
2434 Interstate Plaza Drive Suite 2  
Hammond, IN 46324 Attn Jessica Torres

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

TO:

Patient: Irene Larson  
33454 Ridenour Road  
Dowagiac, MI 49047

Attorney: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recorder of Lake County, Indiana  
Lake County Government Center  
2293 North Main Street  
Crown Point, Indiana 46307

Indiana Department of Insurance  
311 W. Washington Street  
Suite 300  
Indianapolis, IN 46204

You are hereby notified that ST. MARGARET MERCY HEALTHCARE CENTERS, 24 Joliet St., Dyer, IN 46311, 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 October 27, 2008 and was discharged from the hospital on November 3, 2008.

2. The amount due for hospital care, treatment, or maintenance during the above hospitalization is Seventeen Thousand Three Hundred Eighty and Thirty Six Cents \$17,380.36 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:

Account # 0208174137	10/27-11/03/08	\$17,380.36
CNA Insurance	333 S. Wabash	Chicago, IL 60604

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, have 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 state are true and correct.

**ST. MARGARET MERCY HEALTHCARE CENTERS**

STATE OF INDIANA )

(1)

BY:

Megan Kijewski  
Megan Kijewski

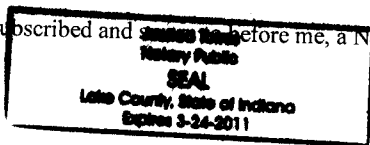
) SS:

COUNTY OF LAKE )

Megan Kijewski being the Workers Compensation/ Legal Specialist for St. Margaret Mercy Healthcare Centers, being duly sworn upon her oath, says the facts stated in the foregoing are true and correct.

Megan Kijewski  
Megan Kijewski

Subscribed and sworn to before me, a Notary Public, this 23<sup>rd</sup> day of April, 2009.



Jessica Torres  
Jessica Torres  
Notary Public

My Commission Expires:  
March 24, 2011

Resident of Lake County

I affirm, under the penalties of perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.

Megan Kijewski  
Megan Kijewski

This instrument Prepared By:

Megan Kijewski  
Megan Kijewski  
St. Margaret Mercy Healthcare Centers  
24 Joliet St., Dyer, IN 46311

# 12  
CK# 770112387  
CIA