2010 042330

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 JUL 21 PM 1:18

MICHELLE R. FAJMAN RECORDER

Acct#200508449

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

TO: Patient:	Lorraine C East-Miller Lorraine C East-Miller 1492 W 131st St Crown Point, IN 46307	Attorney:		
Lake County 2293 North Crown Point	f Lake County, Indiana y Government Center Main Street t, Indiana 46307	311 W Suite India	napolis, Indiana 462	204
	are hereby notified that T intends to hold a Hospita are, treatment or maintena	nce of the above	listed patient as for	ollows:
2. above hosp: (\$ 2, 3. legal repr liable for	The patient was admitted scharged from the hospital The amount due for hospi italization is Two thousa ,759.50) Dollars. To the best of the Hospi resentative claims that to damages arising from the	tal care, treatment and seven hundred tal's knowledge,	ent or maintenance du fifty nine dolla	uring the ars and 50/100 patient's
the Office hundred an undersigne the penalt	s Lien is being filed pursue of the Recorder of the and eighty (180) days aftered individual executing that ties of perjury, hereby substitution described above and that are true and correct.	r the patient wa is instrument, ha tates that the A the facts and	as discharged from the training been duly sworth	the Hospital. The n upon oath, under hold the Hospital
1			Milica Trospo	ec
STATE OF I) ss: LAKE			
are true a	, Inc., being duly sworn and correct.	upon oath, says t $ (2) \qquad \qquad$	thica Mosp	20/1
Subs	scribed and sworn to befor	e me, a Notary Pi	on Stone	
	sion Expires:	A Residen	nd Stone Nota	ry Public County
manc	h 24,2011			
	, under the penalties for Lal security number in this	perjury, that I document, unles	have taken reasona s required by law.	M 16355
This Inst	erument Prepared By: Ear 870	rle F. Hites, Att	orney at Law illville, IN 46410	Ch 16355
			Offici	al Seal