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MICHELLE P. FAJMAN RECORDER

Return To:

Hodges & Davis, P.C.

8700 Broadway, Merrillville, IN 46410

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO: Patient: Javonta J Barnes Javonta J Barnes 2921 W 61st Pl #2 Merrillville, IN		
Recorder of Lake County, India: Lake County Government Center 2293 North Main Street Crown Point, Indiana 46307	311 W. Suite	na Department of Insurance Washington Street 300 Napolis, Indiana 46204
You are hereby notified IN 46402, intends to hold a Phospital care, treatment or mass	dospital Lien for all r	ITALS, INC., 600 Grant Street, Gary, easonable and necessary charges for isted patient as follows:
and was discharged from the hose 2. The amount due for above hospitalization is one! (\$ 1,156.25) Dol. 3. To the best of the legal representative claims to the second control of the second contro	hospital care, treatmen Thousand One Hundred Fif lars. Hospital's knowledge, the following name.	2011
hundred and eighty (180) days undersigned individual execution the penalties of perjury, here	after the patient was ag this instrument, having that the Hoston that the Hoston that the the facts and many that the facts are the facts and many that the facts are the facts	al Lien Law, I.C. Section 32-33-4 in the Hospital is located, within one discharged from the Hospital. The the third been duly sworn upon oath, under spital intends to hold the Hospital atters set forth in the foregoing
STATE OF INDIANA) ss:	(1) BY:	T HOSPITALS, INC. Angie Jukich
I Angie Djukich Hospitals, Inc., being duly swa are true and correct.	, being a <u>Patient</u> orn upon oath, says tha	Representative for The Methodist the facts stated in the foregoing
Subscribed and sworn to b My Commission Expires: March 21, 2019	A Resident of	n- Stone Notary Public
	for perjury, that I ha this document, unless re	ve taken reasonable care to redact equired by law.
This Instrument Prepared By:	Earle F. Hites, Attorne 8700 Broadway, Merrilly	ey at Law ville, IN 46410
AMOUNT \$CHARGECHECK #CHECK #		Official Seal LISA M. STONE Resident of Lake County, IN My commission expires March 24, 2019

COPY_ NON-COM. CLERK_

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