STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2011 054311

2011 SEP 30 PM 3: 19

ACCOUNT# 100408764

MICHE FAJMAN RECORDER

Official Seal

(SEAL)

LISA M. STONE
Resident of Lake County, IN
My commission expires
March 24, 2019

Return To:

Hodges & Davis, P.C.

8700 Broadway, Merrillville, IN 46410

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

| TO: Patient: | RAYMOND PIPPION RAYMOND PIPPION 2400 CONN ST GARY, IN 46407 | Attorney: |
|--|--|---|
| Lake County 2293 North 1 | Lake County, Indiana Government Center Main Street , Indiana 46307 | Indiana Department of Insurance 311 W. Washington Street Suite 300 Indianapolis, Indiana 46204 |
| IN 40402, 1 | mrenda to nord a hospi | THE METHODIST HOSPITALS, INC., 600 Grant Street, Gary ital Lien for all reasonable and necessary charges fon nance of the above listed patient as follows: |
| 2. above hospit (\$ 669 | The amount due for hospitalization is SIX HUNDO Dollars. To the best of the Hospitalization is To the best of the Hospitalization is SIX HUNDO Dollars. | pital care, treatment or maintenance during the |
| hundred and undersigned the penaltie Lien as des | eighty (180) days aft individual executing the es of perjury, hereby | suant to the Hospital Lien Law, I.C. Section 32-33-4 in a County in which the Hospital is located, within one er the patient was discharged from the Hospital. The his instrument, having been duly sworn upon oath, under states that the Hospital intends to hold the Hospital the facts and matters set forth in the foregoing |
| STATE OF IND COUNTY OF LA I REGI Hospitals, I are true and |) ss: KE NA PIRTLE nc., being duly sworn | the METHODIST HOSPITALS, INC. (1) BY: REGINA PIRTLE being a Patient Representative for The Methodist upon oath, says that the facts stated in the foregoing (2) REGINA PIRTLE te me, a Notary Public, this day of |
| My Commissio Much Ny I affirm, ur | n Expires: 2011. Ider the penalties for | A Resident of Salu Notary Public County perjury, that I have taken reasonable care to reduct |
| each social | ent Prepared By: Ear 870 | document unless required by law. le F. Hites, Attorney at Law O Broadway, Merrillville, IN 46410 |

CASH.

CHECK#_

COPY-NON-COM. CLERK_

OVERAGE.

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