STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2012 042268

2012 JUN 26 PM 2: 26

Official Seal

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

100477196

Return To:

Hodges & Davis, P.C. RECORDER 8700 Broadway, Merrillville, IN 46410

SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO: Patient:	Shannon L Irvin Shannon L Irvin 1221 Washington St Gary, IN 46407	Attorney:		<del>-</del> - -
Lake County 2293 North N	Lake County, Indiana Government Center Main Street , Indiana 46307	311 W Suite	na Department of Insura . Washington Street 300 napolis, Indiana 46204	ance
IN 46402, i hospital car 1. and was disc 2. above hospit (\$\frac{4}{3}\$. legal repre	talization is Four Thouse 166.75 Dollars	tal Lien for all mance of the above ed to the hospital all on May 14 , pital care, treatments and One Hundred S. coital's knowledge, the following name	reasonable and necessar listed patient as follows on May 14, 20 2012 nt or maintenance during ixty-Six and 75/100 the patient or the patient individuals and/or	ry charges for ows:  12  13  15  16  17  18  18  19  19  19  19  19  19  19  19
This I the Office hundred and undersigned the penaltic Lien as des	Lien is being filed pur of the Recorder of the eighty (180) days aft individual executing tes of perjury, hereby scribed above and that re true and correct.	suant to the Hospit e County in which er the patient was his instrument, hav states that the Ho t the facts and m	tal Lien Law, I.C. Sect the Hospital is locate discharged from the F ing been duly sworn up spital intends to hold	ion 32-33-4 in ed, within one Hospital. The on oath, under the Hospital the foregoing
	ngie Djukich , Inc., being duly sworn d correct.	being a Patient upon oath, says that	Representative for at the facts stated in My Angle Djukidh	the foregoing
My Commission  17 a lc/1 24	1,2019	A Resident o	Notary Pu	blic nty
each social		perjury, that I he document, unless related to the second	required by law.	eare to redact

AMOUNT \$-

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CASH\_ CHECK # OVERAGE

COPY\_ NON-COM CLERK\_