STATE OF US.

LAKE COURT
FILED FOR RECORD

2014 018272

2014 MAR 31 PM 1: 17

MICHALL D. DRUWN RECORDER

100727846

226738

TO:

Return To:

Hodges & Davis, P.C.

8700 Broadway, Merrillville, IN 46410 SWORN STATEMENT & NOTICE OF INTENTION TO HOLD HOSPITAL LIEN

TO: Patient:	Mlalisi Mike Dube Mlalisi Mike Dube 4040 Hennepin Dr Joliet, IL 60431	Attorney:
Lake County 2293 North	Lake County, Indiana Government Center Main Street L, Indiana 46307	Indiana Department of Insurance 311 W. Washington Street Suite 300 Indianapolis, Indiana 46204
IN 46402, hospital care 1. and was disconnected 2. above hospital care 2. above hospital care 3. benefits to a medical and any oth 3. legal reproduction of the care 4. This the Office (90) days are executing perjury, here	The patient was admitted to scharged from the hospital talization is Theyell Thousand 11,806.50 be which the patient of the Hospital esentative claims that the damages arising from the Country of the Recorder of the Country this instrument, having been that the facts and matters in the facts and matters in the facts and matters.	Care, treatment or maintenance during the normalist Hundred Six and 50/100 This amount is subject to reduction for any leading reconstruct of any contract, health plan, all payments, contractual adjustments, write-offs, s knowledge, the patient or the patient's following named individuals and/or entities are patient's illness or injury causing the hospital to the Hospital Lien Law, I.C. Section 32-33-4 in ty in which the Hospital is located, within ninety god from the Hospital. The undersigned individual multi sworn upon oath, under the penalties of an intends to hold the Hospital Lien as described forth is the foregoing statement are true and THE METHODIST MOSPITALS, INC.
STATE OF INDIANA) SS: COUNTY OF LAKE)		
I Angle Djukich , being a Patient Representative for The Methodist Hospitals, Inc., being duly sworn upon oath, says that the facts stated in the foregoing are true and correct. (2) Angle Djukich An		
I affirm, each social This Instru AN CA C!	under the penalties for personal security number in this deciment Prepared By: Earle F 8700 Brown SILLECK # 19536	wry, that I have taken reasonable care to redact ument, unless required by law. Hites, Attorney at Law badway, Merrillville, IN 46410 Official Seal LISA M STONE Resident of Lake County, IN
N	ON-COM Chenk	My commission expires March 24, 2019