STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 056181

2016 AUG 18 PH 1: 20

MICHAEL B. BROWN RECORDER

101224116

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

TO: Patient:	Jesse Casper Jesse Casper	Attorney:		
racreire.	636 Oregon Rd			
	Valparaiso, IN 46385	_		
Lake County 2293 North	f Lake County, Indiana y Government Center Main Street L, Indiana 46307	311 W. Suite 3	a Department of Insurance Washington Street 300 apolis, Indiana 46204	
	,			
IN 46402, hospital ca	are hereby notified that intends to hold a Hospitare, treatment or maintenant	al Lien for all report of the above lies of the above lies of the above lies of the lies o	easonable and necessary of isted patient as follows:	
2.	The patient was admitted scharged from the hospital The amount due for hospi	on July 21 (,) tal care, treatment	2016 . t or maintenance during the	 he
	italization is Twenty-The	wand Two Hundred	Ninety-Six and 19/100	
or medical	which the patient is end insurance, and credits for benefit.	Attitled under the Control of the Co	contractual adjustments,	ealth plan, write-offs,
	To the best of the Hospi esentative claims that t damages arising from th	he following named		ntities are
the Office (90)days as executing perjury, he	Lien is being filed purse of the Recorder of the Conference of the	County in which the charged from the Hobert Sully sworn uspits! intends to have set forth in the	Hospital is located, with spital. The undersigned upon oath, under the pendled the Hospital Lien as	thin ninety individual enalties of described
		(1) KINAYCIANALILIE	mare Bruse Wh	
STATE OF IN	NDIANA) ss:		Angie Djykich	
COUNTY OF I	•			
Methodist B	ngie Djukich Hospitals, Inc., being du are true and correct.		Ingel DIOR UL	
Subso	cribed and sworn to before	e me, a Notary Publi	Angje Djukich ic, this day of	
- Jugust	, 2016.	Dys	g M. Sfore	
	on Expires:	A Resident of	Notary Public	— c unty
March	24,2019	n kobiacni oi		·
	under the penalties for security number in this			to redact
This Instru	ment Prepared By:	ア・ア		
	AMOUNTS // 8700 CASH CHARGE CHECK # 2/28	e F. Hites, Attorned Broadway, Merrilly	ville, IN 46410	
	OVERAGEE COPY NON-COM CLERK	-	Official Seal LISA M. STONE Resident of Lake C My commission ex March 24, 2019	pires #
252720				The state of the s