## 2017 010519

2017 FEB 17 PM 1: 17

MICHAEL B. BROWN RECORDER

Acct#202403906

Return To:

Hodges & Davis, P.C.

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

TO:	Celeste M. Glover			
Patient:	Celeste M. Glover	Attorney	<b>7:</b>	·
	2990 W. 64th Pl. Merrillville, IN 4	<u>64</u> 10		
	Merriniville, IN 4	<u>04</u> 10		
Recorder of	Lake County, Indiana	Inc	diana Department of	Insurance
	Government Center		l W. Washington Stre	
2293 North Main Street Suite 300				
Crown Point	, Indiana 46307	Ind	dianapolis, Indiana	46204
IN 46402,	are hereby notified the intends to hold a Holare, treatment or main	spital Lien for al tenance of the above	l reasonable and ne re listed patient as	ecessary charges for follows:
1. and was dis	The patient was admi scharged from the hose The amount due for h			
	talization is repree	thousand five hund:	ced sixty five dolla	rs and 56/100
(\$3,	,565,56	ars. This amount i	s subject to reduct	ion for any benefits
	ne patient is entitled			
insurance, and credits for all payments, contractual adjustments, write-offs, and any				
other benef				
3.	To the best of the H			
	esentative claims that damages arising from			
stay:	damages arising from	ii the pattent's.	illiess of injury of	ausing the hospital
scay.				
This	Lien is being filed p	oursuant to the Hos	pital Lien Law, I.C	. Section 32-33-4 in
the Office	of the Recorder of t	he County in which	the Hospital is lo	cated, within ninety
(90) days at	fter the patient was	discharged from th	e Hospital. The un	dersigned individual
executing	this instrument, hav	ing been duly swo	rn upon oath, unde	r the penalties of
	ereby states that the			
above and	that the facts and ma	atters set forth i	n the foregoing sta	tement are true and
correct.				
		THE METHO	DEIST HOSPITALS, INC	
			n Day	20 00 21 - 10
STATE OF IN	IDIANA	(1) MANANA	MILICA DAMJANOVI	Consci
SIAIE OF IN	) ss:		MILECA DAMOANOVI	
COUNTY OF LAKE )				
	,			
I				for The Methodist
Hospitals, Inc., being duly sworn upon oath, says that the facts stated in the foregoing				
are true and correct.				
(2) Milica Wanyanouc				
			MILICA DAMJANOVI	-
G1		Natara	$15^{T/4}$	day of
	cribed and sworn to be	rore me, a Notary	Public, this _/3	day or
<u>rebruau</u>	, 2017.	KIDO	a Mi Storle	
My Commissi	lon Expires:			ary Public
Monch	24,2019	A Resider	nt of <u>July</u>	County
11 100-0001	4 4 7000	·		
	under the penalties to security number in t			hable care to redact
This Instrument Prepared By:  Earle F. Hites, Attorney at Law				
8700 Broadway, Merrillville, IN 46410				
	11 _	o.oo broadway, mer.	CALLVILLE, IN 40410	
	AMOUNT \$		man to make the wife with the transfer of the world	Same of the Committee Americans relative to the committee of the committee
	CASHCHARGE		Official LISA M. S	Sea! 🧯
	CHECK#	E	Besident C	of Lake County in the
	OVERAGE		My comm	ission expires 🔭
<b>(</b>	COPY		a water water and a control of the c	all Brown the control of the second the seco

259331

OVERAGE\_ COPY\_ NON-COM\_

CLERK HS