2008 065 \$84

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RETURN TO: HODGES & DAVIS, P.C. ROER

Attorneys at Law 8700 Broadway Merrillville, IN 46410

RELEASE OF HOSPITAL LIEN

This is to certify that a certain Hospital Lien by THE METHODIST HOSPITALS, INC., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against <u>WILLIAM JOINER</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 13th day of August, 2008, and recorded on the 25th day of August, 2008 (as

instrument number 2008-060213), in the Office of the Recorder of Lake County, Indiana, for the
reasonable and necessary charges for hospital care, treatment and maintenance of WILLIAM
JOINER, in the amount of Four Thousand Two Hundred Sixty Five (\$4265.00) Dollars, is
released this 10th day of September 1, 2008.
In the event full payment of the hospital charges has not been received. The Methodist Hospitals, Inc. specifically reserves all rights it may have to collect the balance due.
THE METHODIST HOSPITALS, INC. BY: Yolanda Jaime
STATE OF INDIANA)
COUNTY OF LAKE) SS:
Yolanda Jaime, being the Service Unit Manager for the Southlake Campus of The Methodist
Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true
and correct. Yolanda Vaime
Subscribed and sworn to before me, a Notary Public, this 10th day of Systember 2008.
_ King Stone
Notary Public
A Resident of Sale County
My Commission Expires: My Commission Expires: Official Seal LISA STONE Resident of Lake County, IN My commission expires
I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.
This instrument Prepared By: (415002)
Clyde D. Compton, Attorney at Law 17
8 00 Broadway, Merrillville, IN 46410

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