2009 065354

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 SEP 25 AM 9: 28

MICHAEL A. BROWN RECORDER

RETURN TO: HODGES & DAVIS, P.C.

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>JENNIFER</u> <u>EBERSBERGER</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>5th</u> day of <u>August, 2009</u>, and recorded on the <u>14th</u> day of <u>August, 2009</u> (as instrument number <u>2009-056251</u>), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>JENNIFER EBERSBERGER</u>, in the amount of <u>Five Hundred Forty Five</u> (\$545.00) Dollars, is released this <u>Devolution</u>, 2009.

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.
This Document Yolanda Jaime roperty of
STATE OF INDIANA THE Lake County Recorder!
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 Jaime
Subscribed and sworn to before me, a Notary Public, this and day of September 2009.
Tung Stone
A Resident of A County Notary Public
My Commission Evniros
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 reduct each social
security number in this document, unless required by law.
This instrument Prepared By: 2015/118
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410
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