STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2011 045121

2011 AUG 19 PM 2: 52

RETURN TO: HODGES & DAVIS P. G. MAN 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>VALYSHA DIXON</u>,

bouthand Cumpus, 67 of Broadway, Internation, mediana 10110, against 11111 Billion,
represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was
executed on the 24th day of May, 2011, and recorded on the 21st day of June, 2011 (as
instrument number 2011-033768), in the Office of the Recorder of Lake County, Indiana, for the
reasonable and necessary charges for hospital care, treatment and maintenance of VALYSHA
DIXON, in the amount of Two Thousand Four Hundred Thirty Five (\$2,435.00) Dollars, is
released this 18th day of August 2011. A
This Decrement is the group of the
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: Alemo
Yolanda Jaime
STATE OF INDIANA)
) SS:
COUNTY OF LAKE)
EUDER'S OF
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.
2 Collins
Yolanda Jaime
Subscribed and sworn to before me, a Notary Public, this // day of, 2011.
Suba Mistone
Notary Public
A Resident of All County
My Commission Expires:
COUNTINAL SOLO LISA M. STONE
Resident of Lake County, IN My commission expires
I affirm, under the penalties for perjury, that I have taken reasonable care to reduce the social
security number in this document, unless required by law.
This instrument Prepared By:
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410
7777-193665

AMOUNT \$_	12
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CHECK #	17469
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