ETATE OF INDIANA

AKE COUNTY
FILED FOR RECORD

2012 059295

2012 AUG 31 AM 10: 09

MICH. FAJMAN 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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against JAMES E BLACKNELI as

represented by the System Statement Of Nation Of Latentian To II. 1111.
represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was
executed on the 7th day of September, 2010, and recorded on the 24th day of September, 2010 (as
instrument number 2010-055689), in the Office of the Recorder of Lake County, Indiana, for the
reasonable and necessary charges for hospital care, treatment and maintenance of JAMES E
BLACKNELL, in the amount of Five Hundred Seventy and 50/100 (\$570.50) Dollars, is
released this 30th day of 1,2012.
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 Lake County Recorder:
THE METHODIST HOSPITALS, INC.
BY
Yolanda Jaime
STATE OF INDIANA)
)-SS:
COUNTY OF LAKE
oddivir or Enter)
Yolanda Jaime, being the Service Unit Manager for the Northlake Campus of The Methodist
Hospitals Inc. have duly sworn upon her outh gave that the facts stated as the form
Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.
and correct.
Yoranda Jaime
the Co
Subscribed and sworn to before me, a Notary Rubling this day of wort, 2012.
<i>A</i> . ()
Notary Public
A Resident of ACIL County
My Commission Expires:
Much 34, 2019 Official Seal LISA M STONE
Resident of Lake County, IN
My commission expires March 24, 2019
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.
security number in this document, diffess repaired by law.
Thus spectrosment Dremoned Day
This instrument Prepared By:
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410
10
AMOUNT \$/
O.A.O.L.
7777-185846 CASHCHARGE CHECK # \ \(\lambda \alpha \cdot \)
OVERAGE
COPY

NON-COM_ CLERK_