JAIL OF INDIANA

\_AKE COUNTY
FILED FOR RECORD

2012 059306

2012 AUG 31 AM 10: 10

MICH PECORDER

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 SHEILA R. WALKER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 1st day of August, 2011, and recorded on the 18th day of August, 2011 (as instrument number 2011-044611), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SHEILA R. WALKER, in the amount of One Thousand Seven Hundred Seventy-One and 75/100 (\$1,771.75) Dollars, is released this 30+6 day of 1,2012.

instrument number 2011-044611), in the Office of the Recorder of Lake County, Indiana, for the
reasonable and necessary charges for hospital care, treatment and maintenance of SHEILAR.
WALKER, in the amount of One Thousand Seven Hundred Seventy-One and 75/100 (\$1,771.75)
Dollars, is released this 30+ day of August, 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
SOLD VIIV OF LAVE
COUNTY OF LAKE
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.
and correct.
Yolanda Jaime
Subscribed and sworn to before me, a Notary Public, this day of Monaton, 2012.
dia malara
Busy Mistora
Notary Public
A Resident of South County
My Commission Expires:  Official Seal 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 reduct each 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
1.9
AMOUNT \$
CASHCHARGE
CHECK #
7777-195513 OVERAGE
COPY
NON-COM
CLERK
<u>L</u>